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Yoga Psychology Magazine

INNER VISION INNER WISDOM

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Editorial: Taking the Quantum Leap
Adam M Cohen, Ph.D.

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YPM

Yoga Psychology Magazine

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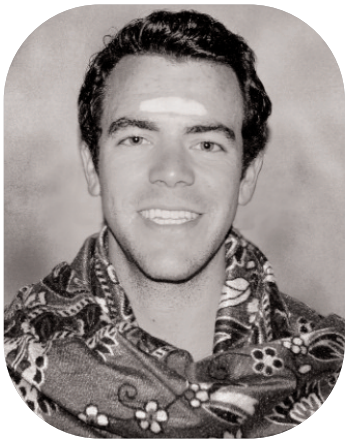
Editorial:

Taking the Quantum Leap



Dr. Adam M Cohen,

Editor in Chief

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Nature can oftentimes be our greatest teacher. The other day as I sat in the forest I witnessed one of the numerous miracles of life, one of the many nuances of existences where profound meaning can be subtly observed. In this particular moment I observed two young chicks who, with alacrity, monitored their mother's instructions on the process of taking flight.

At first the younglings sat with astonishment, appearing as if to say "Are you joking me? There is no way I can do that." But the mother, persistent in her teachings, returned to the side of her offspring, jumped off the branch, and soared into the open mountain air. What came next was a process of pure strength and courage; the first chick, with trepidation, lept off the branch's edge, vigorously flapping its wings in an attempt to take flight. This of course was not achieved, and the little bird gracefully fell down the series of branches extending from the tree until it landed on the earth. The next chick, somewhat befuddled at courage of her sibling, jumped of the branch and alighted beside her sibling on the earth.

As a model of B.F. Skinners Behavioural Training, the mother bird landed beside her young and rewarded their attempts with a chirp and a few nips. Following this first-time exposure to flight emerged a series of additional teachings which involved how to move along the ground, hopping, and eventually climbing back into the nest which rested far above the younglings' heads. In a seemingly condensed amount of time, the mother unveiled many essential lessons to the chicks that would carry into the remainder of their life on earth.

This experience event incited in me the idea of a synonymous philosophy of a quantum leap, a process of moving from one sphere of perception and experience into an entirely new one. Here my particular interest is in the quantum leap pertinent to spirituality; many great minds have taught the concept in the past, including the predominant contemporary teachers like Krishnamurti and Osho. Krishinamurti, for instance, discusses the process of undergoing freedom from the known by leaping out, in an instantaneous moment, from the conditions of the habit-

uated mental thought patterns of the past into an entirely distinct sphere of perception and knowledge.

Spiritual lessons taught in the light of a quantum leap suggest that the quality of spirituality undergoes a profound change when one is able to shift their mind from the exoteric material realm of existence to the esoteric mystic realm. This shift marks an invaluable movement of consciousness from one dimension of perception into another.

The spiritual quantum leap is mirrored in the story of the budding birds in that the chicks had absolutely no idea, or at least so it seemed, as to what would happen if they were to jump off the edge of their home perched in the tree into the unknown sky before them. Although — like the many spiritual teachers that have walked before us – the chicks had their mother to show them possibilities of the future before them, they had no concept of what the the experience of leaping of the edge would be like and had to make the decision to do take action themselves . Quantum leaps inherently posses a plethora of fears about the unknown, and it is for this reason that so few people choose to take the effort to undergo the intense and profound change that lies before them. But when we choose to take the leap, life itself is transformed from the very core, and a holistically unique form of living presents itself that possesses the qualities of peace, unity, and joy.

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Yet the unknown fate of the quantum leap is not totally undetermined both for the chick and for the spiritualist. For example, even though the chicks have never before experienced the glory of flight, they have inherited all the tools necessary to fly. In the same way anyone who makes the effort to take the spiritual quantum leap will not be left to the demise of luck of improbabilities; instead, waiting before them is a whole sanctuary of resources that can be used at their discretion to deepen their spiritual connection in life.

As we release another edition of Yoga Psychology Magazine we hope to ignite inspiration in the hearts of our readers to explore the profound potentials of their minds, bodies, and souls which are capable of housing unfathomable changes in their perception and experience of life. A spiritual quantum leap is not confined to one specific system or ideology, and it is for this reason that our efforts at YPM are aimed at providing our readers with a selection of foundational tools that they can use to create their own experience of taking a quantum leap into a new dimension of life. With another edition of YPM arises another era of opportunity for change, both for the individual self and the collective humanity we are all a part of.

At YPM we are also very particular about generating a quantum leap in the development of our society. As you may or may not know YPM is very much a community-based publication, a place where ingenuity and creativity are expressed and new avenues of psychology are revealed. For this reason our next edition will feature the "Your Ideas" section which involves stories, ideas, feedback, and comments relevant to mind, spirituality, and consciousness. You can even share your own personal experiences with quantum leaps. If you would like to have your ideas featured in YPM please email them to chiefeditor@yogapsychologymagazine.com or visit us online at www.yogapsychologymagazine.com.

Integrating Psychology and Homeopathy: A Means to Determining the Needs of the Vital Force

By: Dr. Ken Silvestri, Dr. Fred Luskin, & Jed Rosen

Yoga Psychology Magazine

January 1st, 2010 | Homeopathy and Mental Health Care: Integrative Practice, Principles and Research, Edited by Christopher K. Johannes and Harry van der Zee. Haren,The Netherlands: Homeolinks Publishers

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Abstract

In this chapter a conceptual framework is described that integrates psychotherapy and homeopathy. This includes a discussion of communication skills, supporting theory, the use of the "Genogram,"(a multi generational psychological tree) and the Stanford University Forgiveness Methodology that can help the practitioner determine the core "grievance" in selecting the simillimum and establishing a treatment plan.

I would like to share a conceptual framework of how psychotherapy and homeopathy can work together to enhance the healing process. Psychotherapy (in its systemic essence) is defined here as the process where one is assisted in recognizing how problems and grievances are interconnected to past and present contexts and resolution is the understanding of this pattern and being empowered to change for the better. Homeopathy is the second-most used healing method in the world according to the World Health Organization. It is based on the principle of "like cures like." Homeopathy's safe, non toxic and regulated remedies stimulate one's immune system to follow its natural direction to heal the mind and body from recognized trauma. The correct remedy or "simillimum" is determined by its match with the gestalt of the presenting symptoms.

Thomas Kuhn (1967) in "The Structure of Scientific Revolutions," describes how change comes about when anomalies or mistunement is recognized. However "change" will be coopted and sabotaged if it is not supported and maintained in a new framework or "paradigm." Traditional psychotherapy has struggled with resistance and "back to business as usual." Homeopathy, although having a long history of clinical successes, has been plagued with the difficult process of determining the "simillimum." Together psychotherapy and homeopathy offer complementary means to recognize the pattern of suffering and consequently strengthen and maintain the immune system to balance the body and mind.

In my practice I regularly use an exercise consisting of a metaphorical "Stereoscopic Lens." I ask those seeking help to share with me what it is that they are not getting in their life that causes pain. I then ask them to imagine that they are seeing their current situation or "grievance" through a presently focused lens, the view that we most often use each day. It's within this framed sense of perspective that we can mistakenly narrow and skew our sense of what may

be happening. We can also, if we choose, begin to recognize mistakes, wrongs, and anomalies within this perspective, which can allow us profound insight into our current life situations, learning style, temperament and family legacies.

I initially suggest during this presently viewed framework that a few deep diaphragmatic breaths be taken that softly fills up the stomach, before moving up to the chest. Before exhaling, with a stress releasing exhalation, I ask them, for a second or so, to widen their lens and see things in a peripheral vision, whether it is the distant corners of the room or the wider perspective of their physical and emotional environment. I then share a specific homeopathic like induction consisting of an emotional simillimum i.e. a statement or narrative related to the change of the presenting problem or grievance that is desired. Within this statement I suggest that it would be beneficial to focus on being grateful for something in their life. For example, a male patient who was 50 years old told me his grievance was that his mother never acknowledged or praised him. She was a single mother who worked long hours and never had time for him. I shared several stories with him about single mothers who made all kinds of sacrifices to raise their children. I also asked him to focus and be grateful for little things that his mother did for him that made him feel good, like shopping for food etc.

This, in most cases brings up from the subconscious a wider perspective about their originally viewed context, of which I ask them to revisit and share with me any revisions or feelings that they would like to make of that view. With very few exceptions, this simple exercise results in a new and positive response to their presenting problem. This process also illicits the core "grievance" or "tale of woe," that forms the basis of one's imbalance of their vital force (Luskin, 2002). I use this exercise progressively in treatment, especially relating it to information from one's Genogram (explained below) which leads to more empathy and insight regarding remedy and psychotherapy directions over time as one articulates their life.

My understanding of Hahnemann's case taking methods was that he readily recorded these systemic images by contextualizing how local befallments manifested themselves (§86-89, refers to the sections in Hahnemann 2002, Organon of Medicine). The "unprejudiced observer" was more than a mere recorder of verbal information. Today's enormous amount of information sharing dictates that we politely dialogue and sensitively ask for clarification, especially since most communication experts agree that 90% of communication is non-verbal. This is eloquently pointed out with examples of appropriate communication skills in Brian Kaplan's book The Homeopathic Conversation (2001). In the footnote to §96, Hahnemann states that for instance "the high pitch of the expression about their sufferings becomes, in itself, a significant symptom in the remaining set of symptoms from which the image is composed." He undoubtedly saw interpersonal communication as more than a linear recording of content.

As I experience the above each day, the following ingredients have emerged for me as a recipe in progress to integrate homeopathy and psychotherapy. Firstly, celebrate interpersonal communication with all its nuances of being connected. Secondly, understand the interconnections of nature so to have a peripheral vision in case-taking. Thirdly, explore psychology as Hahnemann believed that "this preeminent importance of the emotional state holds good to such an extent that the patient's emotional state often tips the scale in the selection of the homeopathic remedy," and "can least remain hidden from the exactly observing physician (apt 210-11)."

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Fourthly, respect constitution and temperament for contextualizing symptoms and lastly, allow collective connections which describes how those seeking our help construct their world by resolving subjective and objective experiences.

The ingredients to integrate homeopathy and psychotherapy | Celebrating Interpersonal Communication

Maintaining change necessitates not only an understanding of our systemic connections but also an understanding of interpersonal communication. When we communicate there are superimposed rhythms that join humans. Participants synchronize their underlying biological rhythms. Implicit rules are part of communication although the process is out of the explicit awareness of the speakers. Listening involves rhythm matching which is also found in body movements. Communication is "the process by which any two pieces of the universe find their relationship to each other." It is thus important to see how humans "tune" into each other rather than seeing humans as "doing things to each other." Interpersonal rhythms lie between or across the biological and cultural, clear distinctions occur and conversations systemically correct themselves. This is similar to what Greg O'Connor (1998) says about Aikido, where "one dances in the flash and flow of 'win-win' energy." Flaws in this process can cause and identify pathology

The frame or context equals the rules of communication. This allows, encourages or penalizes behaviors. Without context that is shared by the speaker and hearer, meaning is unclear. It is the sharing of frames or contexts that allows for the recognition of anomalies to be changed. By understanding how multi-level frames work, we can avoid "right-wrong" labels. When sharing states you can tune into the "love, sacred, ecstatic, transcendent, aesthetic, peak, turned on, art, music, dance etc.

Hahnemann knew that tuning into content alone only contributes to disharmony as it leads to a chase through the repertory without the needed context to match a remedy. When enacting change within a larger holistic or communicational frame, the vital force can be freed to help articulate feelings and give rise to the striking, unique and peculiar symptoms. Hahnemann in §7, points this out in that the essential nature (Inbegriff) of the “symtoms is the outward reflected image of the inner Wesen (essence) of the disease, that is, of the suffering of the life force."

This shared time frame is like a hologram; in that we all share fixed biological rhythm and a subjective modulated one. The aesthetic is possibly the largest available frame. When we recognize its reflection, we can feel it. Paul Byers (1985) believed that "tuning to content contributes to disharmony - when i.e. evil is enacted within a larger aesthetic frame, the inner, natural ideal can shape our feelings and frame our attempts at a solution." The "aesthetic is the name of the ideal human game." If we can understand change in larger and larger frames, we can find ourselves sustaining it in the natural flow of things.

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Implications

It is important to “join” those seeking our assistance. A comfortable interpersonal environment is essential as we synchronize and form shared rhythms. The unprejudiced observer needs to go to the next level and see things in “context” in order to truly understand the essence of one’s inner existence. This can only be accomplished as the homeopath becomes an active participant observer.

Understanding Context and Systemic Treatment

In developing an understanding of someone who is seeking assistance, we have been taught by Hahnemann and Boenninghausen to listen to the narrative that fills their presenting context. The open questioning (“as if.”) brings forth information regarding the location, sensation, quantity, time, circumstances, modalities and concomitants. My bias of using the family Genogram (see Genogram format end notes below) allows me to have a peripheral vision in case taking. Each bit of narrative information can be seen not as facts and content but as being simultaneously part of the interconnected levels of the wider lens.

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In the ecological movement of the past few decades, it was pointed out how the chemical DDT was able to kill the predators of certain wounded agricultural crops. In this context there were cheers and accolades especially as crop values increased. However within a few years, DDT was seen to enter the biological food chain, soon entering mothers' milk of humans. Many species of insects and animals either became or were soon to be extinct.

It became apparent that something that seemed good in one context may not be good in a simultaneously connected wider context. Similarly, using corporal punishment on a child in one context may alleviate the presenting problem, yet on a wider psychological level it can do harm. It turned out that marigolds (Calendula) could have and did heal the crops, keeping its natural predator safe and restoring that particular ecological pattern. What we learned from ecology is that the patterns of these contexts connect to form our "Gaia” (Silvestri, 2007).

The beginners’ mind of case taking is the ecology of the mind. The mind/body narrative that is seen within this context allows for the emergence of unique stories. The strange, extraordinary, unusual and odd, is the kind of every snowflake being different theory. The nature and essence of a person can only be determined from this framework if we are to truly sustain the change we are looking to assist. The alternative is to have the dog chasing its tail syndrome.

Since Homeopathy is the only healing form that so extensively records the mental and emotional patterns of its' remedies, it stands to reason that contextualizing case taking can better help find the simillimum. "These [patterns] above all, must correspond to the very similar ones in the symptoms set of the medicines sought" (§153). Other common symptoms also need the defining context of sensations, modalities and accompanying symptoms to become useful in this framework. Stepping outside of content and organization of the facts is to recognize the anomaly that Kuhn mentions and helps us to perceive the "mistuning of the psyche" and the "instinctual nature" of the pattern that needs to be changed to restore the "vigor vitae.”

Hahnemann developed a holistic view of human nature. It was the "conscious spirit," the psyche and its consequent functioning; "instinctive vital force," the essence (inner Wesen); and the "physical organism," the essential nature (Inbegriff), that worked together to become more powerful than the disease that was mistuning the vital force. The mistuned energy (innate and acquired) is the subconscious language of the vital force. To effect change the anomaly is articulated from that inner voice. To hear it necessitates recognizing how "emotions circle like satellites around archetypal complexes. Every person is a mixture of feeling and thinking, every symptom has a circle of possible related symptoms. By knowing how the concentric circles of the symptoms fit together in the individuals we come to understand the essence and the totality" (Little, 2001). This is how patterns can be described as systemic, holistic or ecological.

One has to tune into this inner voice and empathize with the contextual connections that qualify the totality. This means using whatever variations, be it the stereoscopic exercise in paragraph one or the various repertorizing methods stressing mental (Kent) in some cases; physical generals and particulars of Boger; the more clinical and organic pathology that may be more suited to Boenninghausen's methods and/or others. If the recognition of the needed change is not supported by a combination of systemic means to address the fundamental, exciting and maintaining causes, the patterns of business as usual will sabotage any possibilities of sustaining it.

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The framework I use to record a case and to look for solutions to one's problems and hurt is a three-generation relationship family tree called a "Genogram," (M. McGoldrick, et, .al, 1999) which is used regularly in systemic psychotherapy. This allows me to understand the emotional and physical descriptions of one's life, legacy, and presenting grievance. A Genogram is a transgenerational depiction of one's family pattern and legacy. It is a tangible and visual means to map large amounts of information in a concise manner. At a glance one can see the complexity of a family context and its' connections to past emotional issues. It allows a clear introduction and way to get to know one's life patterns. Providing a sense of history and psychological attributes, the Genogram portrays the ongoing evolutionary journey and interconnections to larger contexts of education, employment race, culture, ethnicity, class, religion, and health and many other structures and issues (see attached Genogram symbols.).

The wider perspective of the Genogram also reveals hidden information and magical connections creating a perspective that frees the individual in many cases from blame or a deviant label. The theoretical basis of the Genogram is from Family Systems Theory (McGoldrick, 1995) which describes how the family system moves to maintain and adapt to input within a given context that is simultaneously part to whole connected to wider contexts. Within this framework I have added another dimension that in my mind is the foundation for successful psychotherapy which is "Forgiveness." It is here that I emphasize how one deals with their "grievances'" or "a tale of woe'" which is when someone does not get what they may want. Usually this is the window to how one manages stress, creates demands, and attempts changing what may not be in their power to change.

Implications

Understanding how our world works in part-to-whole connections is understanding nature. By recognizing that Homeopathy is in tune with how nature works, using a wider ecological framework such as the Genogram, can depict multi-levels in ones legacy. It is within this map that unique patterns, miasms and coping skills emerge and are learned and determined to match

with needed remedies and subsequent life style changes..

Explore Psychology

Hahnemann supported the use of humanistic psychology in treatment. "In all the so called somatic diseases as well, the mental and emotional frame of mind is always altered (§210)." In §211 he comments that "this preeminent importance of the emotional state holds good to such an extent that the patient's emotional state often tips the scale in the selection of the homeopathic remedy. This is a decidedly peculiar sign, which, among all the signs of disease can least remain hidden from the exactly observing physician." Homeopathy's context includes detailed information of psychological states produced and cured by its' remedies.

The importance of using homeopathic psychology is further supported by how physical symptoms disappear as mental illnesses appear. Documented cases demonstrate how serious physical disease can suddenly turn into deep one-sided mental and emotional dysfunction (§216). The physical symptoms improve as the mental problems become worse and in some cases can go back and forth (§220). Hahnemann used crisis remedies when physical or mental symptoms worsen then returned to the chronic remedy when appropriate to sustain his treatment. In §221, he recommends acute intercurrents when flare ups of acute crisis occurs. At this point, retaking the case and using Boenninghausen's concordance and relationship of remedies is very helpful in continuing psychological assessment and ongoing treatment.

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The differential assessment of psychological symptoms can point to old habitual patterns of bad life style and be assisted with psychotherapy. In §228, Hahnemann writes that psychology is "diet for the soul" and that the use of "honesty" and "empathy" is essential to join with a patient and insure continuing trust. David Little (2001) points out that being sympathetic for the suffering of others is part of our own healing process and the power behind cure is compassion.

Homeopathic mind cure must be homogeneous to the symptoms and in context of the individual. The "disease mistunements can be caused by imagination and therefore similar remedies can cure them" because strong similar powers extinguish a weaker similar power (footnote to §26). "Both physical affections and moral maladies are cured this way" i.e. grief cured by hearing another greater grief even if fictitious. Hering for instance resolved his emotional grief while seeing a ballet based on a Greek tragedy that was similar to the origin of his situation. J.T. Kent in his Lectures on Homeopathic Philosophy talks of being empathetic, "Sympathy and similar can go a long way in the realms of the psyche." The blending of homeopathic psychology and mind/body represent a largely unexplored region of the Organon and can be used effectively when following homeopathic principles of being similar and in a minimal dose (Silvestri, 2002).

Fred Luskin (2002) in “Forgive For Good: A Proven Prescription For Health and Happiness” emphasizes a forgiveness methodology based on rigorous research that documents the effects of unresolved grievances on one’s emotional and physical health. Forgiveness is not condoning or minimizing one’s hurt. It is for oneself to be in the present and not allow their grievance or pain to take up unnecessary space in one’s head. When a grievance is embedded and shows no resolution, the sympathetic or “fight or flight” reeved up part of our nervous system becomes over used. This part of our nervous system is great for reacting to a life threatening situation,

but injurious to our mental and physical health if over used. When we have unresolved pain there is a tendency to become the victim and create demands that are ”unenforceable.” Statements of “how could this happen to me,” do not recognize that the world says “no.” However, we can have choices and wishes to change our framework and utilize our parasympathetic nervous system (the “calm down” part). This can be accomplished by mindfully focusing on and being grateful for the good in the world. It is here that homeopathy can help the immune system to recognize any mistunement and allow it to continue its natural direction to heal the mind/body (Silvestri, 2009). For Luskin’s nine steps for forgiveness see fig. 1.

Nine Steps To Forgiveness

Know what you feel so you can allow empathy to produce a “non-denial” of feelings. Soul sickness is lack of perspective. Widen the lens to view what is the “wrong” that hurts you. Our good side, persona, is constantly overtaken by our shadow side when we lose perspective.

Forgiveness is for you and it is a process to make peace with yourself.

Forgiveness is not about minimizing the hurt it is about changing your grievance story. Forgiveness does not necessarily mean reconciling with the person who upset you or condoning their action. It is to set a goal to let yourself go to a spiritual side that does not blame or hinder your well being. It is in a sense a way to stop relieving the grievance and stop unnecessary dwelling on the negative.

Choosing to forgive. Is choosing health or being a victim. Get the right perspective on what is happening. Recognize that your primary distress is coming from the hurt feelings, thoughts, and physical upset you are suffering now, not what offended you or hurt you two minutes or even ten years ago. Uncomplicated grief is easy to handle, i.e. you missed your movie or the grocer was out of your favorite food. Complicated grief is when you credit your bitter bank and become a millionaire in bitterness. The tale of woe gets bigger and keeps you connected to negativity in the past. The gap between what you want and what you got is an important gauge as to your health. Life says “no” in so many ways, it is part of the natural suffering we encountered everyday. As Richard Carlson wrote “don’t sweat the small stuff.” How serious we take ourselves manifests in how we balance our mind and body. We need to make peace with the “no.” This is not to minimize your hurt but to realize that the grievance story may not be reality. The map is not the territory but our flight or fight mechanism will nevertheless react to the map. If the threat is gone don’t continue to have your body injured. Think of the grievance, take a deep breath and create a loving image of your positive possibilities.

Have positive emotions as you cope with confidence. At the moment you feel upset, practice the Positive Emotion Refocusing Technique (PERT) to soothe your body’s flight or fight response.You can choose the TV. Channel that you wish to see. Why not choose the life view that you want to live within.

Give up expecting things from those who will not give them to you. There are certain unenforcable rules that strengthen the grievance story. If we cling to a grievance we will live the grievance. We can not demand a return to desire. Let go and soften yourself. You may become more vulnerable but you will be more human. Learn to forgive yourself, smart people can do stupid things and good people have good intentions. My friend John Welshons writes in his recent

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book When Prayers Aren't Answered, (Novato, California: New World Library: 2007) that "..the acceptance of things as they are in this context does not imply complacency…the acceptance of things as they are is merely intended to alleviate suffering we habitually create in our minds with the desire to change things we simply cannot change (p.151)."

Put your energy in a positive place. Have self compassion. It is what we learn from suffering. Embrace positive intention. We cannot write off the other who hurt us. It may have just not worked out or the other had karma beyond your control. If you apply your intent in a non-demanding way your interactions will synchronize if the other is willing to join you in an honest win-win volley. Acceptance of who you are and your evolving growth is love. We are all fallible and we have choices to have noble intents.

Remember that a life well lived is your best revenge. Instead of focusing on your wounded feelings, and thereby giving the person who hurt you power over you, learn to look for the love, beauty, and kindness around you. When you look inside your enemies you see their pain. When there is no revenge you are forgiving and a life well lived is your response. If you seek revenge you are digging two graves and we become what we don't forgive. It is our choice not to define ourselves by the others who have hurt us.

Amend your grievance story to remind yourself of the heroic choice to forgive.

The above forgiveness framework; articulates causation/solution in conjunction with the Genogram; which provides context/information, produces an integrative process for determining the sensation, modalities, location and other associated symptoms needed for determining remedy and counseling directions.

Mindfulness, forgiveness, and health

In my own practice I employ and teach mind/body techniques with "mindfulness" at their core. My clients are willing and eager to explore the benefits of using these techniques, but for many of them it is easier said than done. Our complex and fallible nature often needs assistance in overcoming unhealthy patterns. This is where homeopathy's role in getting us "un-stuck" is so evident.

The main tenet of being mindful or to have a "beginner's mind" is to pause and focus while viewing the world as a part-to-whole interconnected process. The consequence of not recognizing our mutual interdependence with nature and others can lead to stress and "fight or flight" patterns, all of which have been linked to compromised immune systems and other health threats. Thich Nhat Hanh, a Vietnamese Buddhist monk who has helped popularize mindfulness, urges us "to be fully alive" and to "look at living beings with the eyes of compassion." This sounds simple but it can be very difficult to enact. Forgiving the past – oneself and others – is a key step in fostering this kind of mindfulness as well as improving health. Fred Luskin (2002), as mentioned above, further describes how we form "grievances" as a result of not getting something we desire. When it becomes "personalized" ("why me?"), the grievance has enormous power to distort our perceptions and harm us both mentally and physically.

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We cannot erase the marks that our wounds leave on us, but we do have a choice between uncomplicated grief that is put into perspective and complicated grief that stays connected to the past. The grievance or tale of woe keeps the connection. Luskin's main point is that the "offender" need not be the star of the story at our expense. Continuing to live in the story keeps us in "fight or flight" mode, whose constant overuse can cause physical damage as well as mental and emotional problems. Forgiveness is a mindful process that can disconnect us from the past and empower us to heal, but it is not easily accomplished without help and nurture.

Between the lines of the above description of grievance and forgiveness are the clinical experiences of generations of homeopaths using homeopathic remedies to awaken self-awareness and balance the immune system after all kinds of trauma. The homeopathic repertory (a reference work that lists symptoms and the remedies that are known to address them) contains a host of information about mental-emotional symptoms related to "grievances" such as; brooding, disappointment, grief, anxiety, anger, humiliation, reproach, resentment, hatred, and holding on to the past. We also know that certain remedies address physical ailments that can result from withheld grievances, such as exhaustion, nervous affections, heart problems, immune system problems, and hypertension.

Many homeopathic remedies have the potential to address nearly all of the traumas one may encounter, however I have found that the framework of the forgiveness methodology facilitates the recognition of the needed "constitutional" remedy when one is holding on to a "grievance." The remedies shown below are examples of just a few that might be indicated for any particular individual in need of forgiveness and psychotherapy (Silvestri 2008).

Selected "Forgiveness Remedies"

Aurum metallicum (pure gold, a mineral remedy) can help people who are full of self reproach and blame and may address depression that arises from this. People who need Aurum have very high standards for themselves, so they tend to feel failure and guilt keenly. Their sadness is intense and can be suicidal usually as a result of not achieving their high goals. Aurum is indicated when a sense of loneliness is prevalent and there is a tendency to be very quarrelsome. The temperament of people needing this remedy shows strong duty bound and workaholic tendencies. There is much self reproach, despair and shame within their tale of woe. They feel worse from cold and boredom and usually feel better with music. This remedy can be called for when someone has difficulty expressing anger because of their depressive state, whereas people who need Staphysagia (see below) will still function and outwardly express their dissatisfaction. Other Aurum remedies may be more specific for certain differentiating symptoms such as when there is enormous anger when thinking of one's ailments, especially after mortification (Aurum muriaticum; chloride of gold). Aurum muriaticum natronatum (double chloride of sodium and gold) would be indicated when there is extreme unrest and impatience and Aurum sulphuricum (sulphide of gold) when there is a strong sense of despair regarding recovery from one's trauma.

Ignatia amara (Ignatia bean, a plant remedy) can help people who exhibit hysteria and a sense of being stuck in grief. In people needing Ignatia, bitter and longstanding disappointment manifests in deep brooding and despair. The grievance pattern is supported by a worsening with criticism and being alone. There can be suspicion about what others think of them, and they are prone to contradict even though they crave attention. The sentimental yet quarrelsome na-

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ture of people needing Ignatia makes them vulnerable to taking affront. When they have a grievance, they come across as being beside themselves as they hold on to their insult. They may have a sensation of a lump in the throat. The person needing Ignatia feels better with heat, cries easily and improves from eating unlike a Natrum muriaticum person who is aggravated by heat, suppresses tears and is worse eating.

Nitricum acidum (Nitric acid) is indicated when the lack of forgiveness is characterized by anxious, complaining, irritable behavior and strong resistance to resolving their "tale of woe.". People needing this remedy can be very abrupt, unforgiving and vindictive with aversion to any conflict which produces strong resentment. Negativity, peevishness and nasty can be traits leading to this remedy. They are prone to hold on to their grievances with a grudging manner. They can be restless and dissatisfied with everything. Anxiety about health is a keynote as well as not admitting to any obvious improvement to their health. There is a strong oversensitivity to what people may think about them, which supports their holding on to hurts and blaming others for taking the joy out of their life. Food cravings revolve around fats and salts, and they are chilly by nature and complain of splinter like pains. They have a strong sensation of inner uneasiness or constriction throughout their body and are usually better when lying down.

Natrum muriaticum (common salt) may help those who are romantic, responsible, somewhat fastidious, introverted and prone to produce grievances based on their great sensitivity in relationships. The grief and taking things very personal keeps their tale of woe very silent and suppressed. They are better for solitude, worse for consolation, yet with extreme dwelling on past offenses, reminiscent of visions of the biblical wife of Lot, who on looking back turned into a pillar of salt. There is a clear vulnerability with fears of rejection and affects of loss, separation, resentment and humiliation. There is a liking for salt, symbolic for the dried up tears of long term grief, and other characteristics of dryness. There is much exhaustion but usually amelioration with fasting when this remedy is indicated.

Phosphoric acid has an affinity to being needed when there is an overwhelming sense of disappointment and loss, especially of loved ones.. They become negative and longing for acceptance. There is a flat indifference, doubt and weak apathetic quality to their grievance story which differentiates them from the other remedies. The need for this remedy is also indicated when there is a collapse and forgetful state. There is a yielding and slow disposition with a silent holding on to their grief.

Staphysagria (Stavesacre) is warranted when there is difficulty expressing the grievance clearly. There is much anger and apathy about all things, yet has an underlying sense of being mild and sweet which can confuse their sense of expression. Constant dwelling of unpleasant thoughts with low self confidence is evident. Betrayal with indignation and an irritable temperament is a characteristic of this remedy. Horrible and sad stories affect those in need of this remedy and they can easily throw things as a substitute for verbally expressing their anger. There is an aversion to physical exertion being touched, and confrontation.

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Implications

Psychology is the framework where solutions are found. Using the forgiveness methodology can produce the means and information to create solutions. Rubrics appear in the articulation of "grievances" and relevant mindfulness skills, which in conjunction with homeopathic treatment, takes the healing process to new levels.

Respect Constitution and Temperament

In homeopathy we are taught that causation, constitution, and the totality of symptoms are three critical factors. Boenninghausen writes about the importance of understanding who, what, why, with what, modes, when. He also emphasizes the need to understand causation and how imbalance in ones' make-up opens the door to the need for change. David Little (2001) describes how remedies have multi-polar nature having been tested on a wide variety of people. Constitution and temperament is what we view first in the patient. This helps contextualize symptoms that are similar and places them in the perspective of, for instance, the thin and dry constitutions (the twin biles of melancholic and choleric) or the heavy and wet constitutions (the sanguine and phlegmatic) metabolisms.

How one feels, radiates and adapts are further cues to their ways of gathering information and handling their evolving contexts. Their family legacy and life cycle narration play a part in this determination. Learned communication and somatic foundation is the basis to confirming complex emotions "that circulate around the center like satellites." Reactions from dialogue can lead to exploring essential patterns that define striking extraordinary, unusual and outstanding symptoms. Respecting constitution and temperament allows the observer to participate in patients over lapping states i.e. Nervo-Choleric, Sanguine- phlegmatic etc. and through homeopathy's wonderful case narratives and provings point to remedy resolutions and life style changes.

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Implications

In continuing the homeopathic treatment, understanding one's temperament and constitution produces resources to maintain improvement. Psychotherapy, especially using the forgiveness methodology can help create life style and mind/body skills to support and adjust the changes (including complementary remedies) that accompany the healing process.

Allow Collective Connections

The final considerations in sustaining change deals with a deeper understanding of how our patients construct their world. Reconciling subjective and objective experience is one of the ongoing challenges within our human fallibility. Jung believed that the subjective part gets its information from symbols of inherent instincts, ancestral connections and universal archetypes. "The collective unconscious communicates from the timeless space that is the source of all religious, myths, visions, dreams, fantasies, altered states, fairy tales and folk stories." It is a holding place for all the experiences of humanity and a means to wholeness. As ignorance can

misguide us, the grasping of one's potential as well as constraints can enlighten us. "When we confront the mythological core of our experience it offers transcendental meaningfulness of our lives" (Silvestri, 2002).

The objective psyche is an energetic field of experience lived through these archetypes. Edward Whitmont, who himself was a psychiatrist and homeopath further elaborates that psychological happenings are processed and manifested in language of symbols. This is a demonstration of the "purposeful direction of movement that expands that which is deficient and balances what is exaggerated." This natural movement toward wholeness is what Jung called the "self." If this is the case, "Then all psychosomatic phenomena can be given meaning, intent, and provide information about the state of the unconscious if interpreted symbolically" (Silvestri 2002, 2008). It can also be the source for articulating one's grievance story or "tale of woe" which perpetuates the "fight or flight" part of our sympathetic nervous system, It is in this realm that Fred Luskin (2002) demonstrated the injurious effects of unresolved grievances to one's emotional and physical health.

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As humans we have an inherent nature that moves toward collaboration. Neurosurgeon Karl Pribram describes how our brain acts holographic ally within a holographic wider context of our world (Byers, 1977). This can easily demonstrate the archetypal development and accessibility to our interconnectedness (i.e. yin-yang, I-Thou etc.) that all of us need in order to be awakened from ignorance. Jung demonstrated how the ego provides our conscious with content yet the shadow; our compensatory sub conscious provides subliminal experiences.

The collective unconsciousness and the self are information sources that go much beyond personal experiences. The blend of the conscious and unconscious dialogue is constant and the symbols that arise in consequent dreams are the language of the unconsciousness, and could be a medium of inspiration and art. It is this process that can also be the driving force behind psychosomatic problems. Being out of "sync" is an indication of imbalance. Although we never see the invisible pure form of the archetypal thing, we can strive to harmonize with its manifestation pattern and essence. The simultaneous awareness of these connections, the "Ah" experience, is the spontaneous automatic reactions that do not follow the rules of the rational mind. Jane Cicchetti (2001), in an interview, said that "Jung felt that symbols were the best possible expression of a reality and wholeness that is greater than the intellect can conceive; that symbols point the way to a greater reality." She also points out that when we open our minds to this reality, we are able to make connections and see the wholeness of a homeopathic case more readily."

Implications

Being aware of connections and how symbols give us understanding of life's paradoxes and potential creativity is the basis for moving toward wholeness. Homeopathic remedies resonate with natures plan and they can be identified and matched with the emerging articulated "self." Homeopathy and psychotherapy when integrated provides ongoing assistance to this process.

Genogram Format (McGoldrick, 1995) and case example

The Genogram is a transgenerational and psychological family tree. Using the symbols above one can depict an individual's relationships, family patterns and influences. Factual information about illnesses etc., help determine miasmatic patterns and legacy. Parental traits and communication (i.e. open, closed, nurturing, controlling, abusive etc.) from one's own narrative allow for an understanding of how one was raised and reared relevant to developing communication and cultural traits. Constant recording of "grievances," sensations, modalities, locations, and other related ailments will produce an ongoing narrative and openings for striking and unique symptoms applicable to determining homeopathic remedies and psychotherapy directions.

Some initial questions:

How do family members think about one another? (Look for characteristics that are brought up i.e. the loudmouth, spendthrift, softie etc.). This provides articulation of joys and pains. Patterns of emeshment and cut-offs can be the "not-well-since" beginnings of past and present aggravations, resentments, grievances leading to symptoms found in homeopathic repertories.

Who was named for whom in your family? (Look for how names reveal roles, hidden meanings, historic connections and psychological patterns).

Were there coincidences between the births of family members and moves or migrations, illnesses or death, changes in family finances, etc.?

How much did the family conform to gender stereotypes of their culture and era, which members did not conform, how were they viewed and how did the family demonstrate flexibility (or inflexibility)?

How did the family deal with rituals, stress, rules, leisure, beliefs, and explaining or telling stories of death, money, education, betrayal etc.?

What kind of relationships did one's parents have with their parents? How did you relate to your parents, the good, the bad, any grievances, traumas, life cycle and developmental issues etc.?

How did you relate to your siblings? How were siblings expected to behave? What roles did you and your siblings have in the family?

What are the patterns of couples relationships in your family? Divorce, power struggles, gender roles, employment, attraction, strengths, weaknesses, and how did this effect your development etc.?

Class, culture and diversity questions can include narratives of ethnic background, celebrations, stress management etc.

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Implications

The above suggested questions provide background and support for assessing the presenting problems, grievances (what one is not getting), unenforceable rules (see the nine steps in the forgiveness methodology), coping skills, and stress management. This allows for more concise ways of describing sensations, modalities, location and other related symptoms. The recorded narrative, information and behavioral patterns can then used for determining a constitutional remedy and through the forgiveness methodology (explained above), a therapeutic framework.

Using the forgiveness methodology and the Genogram format provides qualifying information that will help determine the core grievance and differentiate between indicated remedies (see selected forgiveness remedies above).

Example:

A condensed case example was a woman in her early thirties who presented with a Phosphorus persona. She was very intuitive, extroverted, open and impressionable. There was a sense of self importance and desire to be the center of attraction. She however was very concerned about her sense of physical weakness (chief complaint) especially when things were not going her way.

She had been treated by a homeopath previously with Phosphorus, but felt there was little change in her symptoms and disposition. Her family of origin depicted in her Genogram indicated many stories about the lack of structure, encouragement and affection received from her parents. She felt like she could not succeed at her job (retail/sales) and narrated trouble organizing herself. However her evaluations and performance was acceptable to her employers. She articulated being criticized by her parents for her choice of employment. Her narration of her early family dynamics stressed that she never was "good enough," and even when she was motivated or excited about doing something her parents and older sibling would "bring her down."

She was not able to express this or show disagreement since this was unacceptable. Asked how she dealt with this, she explained how she would become very introverted and held her anger inside when at home but would constantly discuss her sense of dissatisfaction (not anger) with her life with anyone who would listen (a strong Phosphorus trait). When asked what it was that she was not getting in life, she expressed it as wanting "her integrity," that her parents destroyed. She thought of this daily and blamed her parents for her dissatisfaction with work and life. She would become exhausted whenever she focused on this feeling or was involved with her parents. When she was sad and tired she would become yielding and feared losing her integrity and "self control."

What emerged from her family narratives and her grievance story was someone who had clear extroverted intuitive traits who would move to an angry introverted state. This would be what Carl Jung described as one moving from an outgoing sanguine state to her inferior side which was an inward choleric state. Her outgoing "persona" was one of being impressionable, artistic, intuitive, and the center of attention. The "shadow" side or inferior trait (usually where the

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strange, peculiar and unique symptoms needing attention are located) was characterized by false pride, self pity, and dwelling on her problems. This produced an inability to finish her objectives and feel a sense of integrity.

Repertory rubrics that came to the surface revolved around her "loss of position," shame regarding her parents and sibling dynamics, lose of control, and a distorted sense of self importance. The remedy Staphysagria was further confirmed by her aversion to being touched when she was exhausted, desire to throw things when angered and her recent articulation of indignation toward her parents behavior.

She was given the remedy in a 30C medicinal solution, followed by a Q1 potency with striking improvement. Her follow-up sessions focused on her changing her "grievance story," using relaxation exercises and having positive intent following the forgiveness steps. After six weeks she began taking Phosphorus (medicinal solution of the Q1 potency) which was now clearly indicated as the Staphysagria symptoms dissipated. She articulated continued improvement in her total well-being and felt "invigorated and confident."

Conclusion

I have always believed that the process of psychotherapy or for that matter life itself is to recognize and "differentiate" from injurious patterns that hinder one's optimal health. We cannot isolate ourselves from the many contexts of life, but we can keep our integrity and simultaneously see the larger picture that we are part of and within. When homeopathy is combined with psychotherapy, the process of becoming "whole' is much more attainable. Understanding one's role in a family system can for example unveil dynamics connected to grievances and consequent symptoms that represent universal archetypes opening up new avenues for understanding what is needed for cure. If the goal of classical homeopathy is to intervene with remedies representative of the whole person, then homeopathy can help with psychological assessments and how family/community contexts can foster or hinder better health..

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Anthropologist Paul Byers (1977), when explaining how systems worked, used the metaphor of a watch with its many parts placed on a table. It showed little resemblance to a timepiece. Yet when put together it could either tell the "correct" or "wrong" time. Like a thermostat regulating a heating system, it is the input of setting and maintaining that allows a system to avoid the ever-present forces of entropy (movement to disorder). The human system with its regulating forces of communication, temperaments, ethos and other homeostatic elements can be the source of conflict warranted by our fallibility but also exciting grist for creativity and joy. Being in touch with this map can help with understanding possible avenues of change and the resources to sustain that direction.

I am not suggesting a replacement of existing case methods in homeopathy; however, using a visual map of family dynamics enhances the questions of who, what, where, with what, why, what modalities of the homeopathic assessment. This in turn, demonstrates how homeopathy helps provide new solutions and understanding for life style changes and other psychological interventions. Looking at the part to whole connections allows for depth of analysis and avoids self fulfilling "cookie cutter" quick fixes. The qualifying interactions and chronological data in such a process put into context the qualitative attributes of the individual and their system. David Little (1998) describes this process as how "conceptual thought is a manifestation of

the archetypal drive toward order and meaning." The format that I am suggesting helps depict this "meaning." All the institutions and contexts that have influenced one's development can be understood in their part-to –whole connections. In this framework, the chief complaint for instance can be a portal to the essence of the case, as can be gestures and themes, however using a wider lens allows for the multi layers to unfold and to qualify and avoid superficial diagnosis.

Using the Genogram and probing for "grievance formations" allows a participant observer (Homeopath) to trace and interact with the different types of temperaments and their psychic manifestations (i.e visual, auditory, feeling etc.). The energy of one's legacy literally and figuratively "jumps out." If the self and the collective conscience are more than conditioned reactions, then this mapping of interactions and relationships can be part of the larger archetypal drive for balance. Sometimes a map, which is really not "the thing," can still help visualize the manifestations of one's "Wesen." Responses to how one feels ("as if ..."), are the interplay of the unconscious mind's associative functions and the rationality of the conscious quest for explanations. In this map, the invisible energy of the archetype emerges as form. Feelings and tones can give many messages, as well as silence and tears. All this can be used to assist the self's innate move toward wholeness, and the symbols of the system are a key to understanding and changing any psychosomatic dysfunction which can be achieved by homeopathy's clinical provings.

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The integration and reciprocity of psychotherapy and homeopathy encourages a guided narrative of one's self identification in the context of their significant relationships and developmental stages. It provides a familiar backdrop (not always comfortable) to answer all of the questions suggested in Hahnemann's Organon. Hahnemann regularly investigated entire family trees to better determine the befallment of issues effecting the vital force and chronic miasms (§82-99) because for him "the cause of a thing or an event can never be at the same time the thing or event itself" (Organon, introduction, p. 10).

This is relevant today since we are constantly influenced by cultural and language constraints, what Martin Buber (1970) called the "I-it," which is antithetical to the "I-Thou" of optimal health. For me the Genogram offers a wider format to join with another and avoid the "name is the thing" trap by understanding patterns that point to a constitutional state through one's own description and perspectives. There are an infinite number of frameworks and inductions similar to what I described above, my point is that for homeopathy, the "widening " of its lens can provide more opportunity for identification of fundamental beginnings, awareness of exciting influences and the altering of disease states from the life context of the individual.

The process of homeopathy is more akin to interpersonal relations and communication skills than it is to the "medical model." The ongoing conversation or dialogue with those seeking help is what depicts the essence of homeopathic remedies and the many possibilities of seeing them in different and updated contexts. Learning good communication skills is also the vehicle for learning more about us as humans with our own fallibility. This only enhances our role as homeopaths but also the biological connection we have access to when we tune into and "be" together rather than "do" things to each other.

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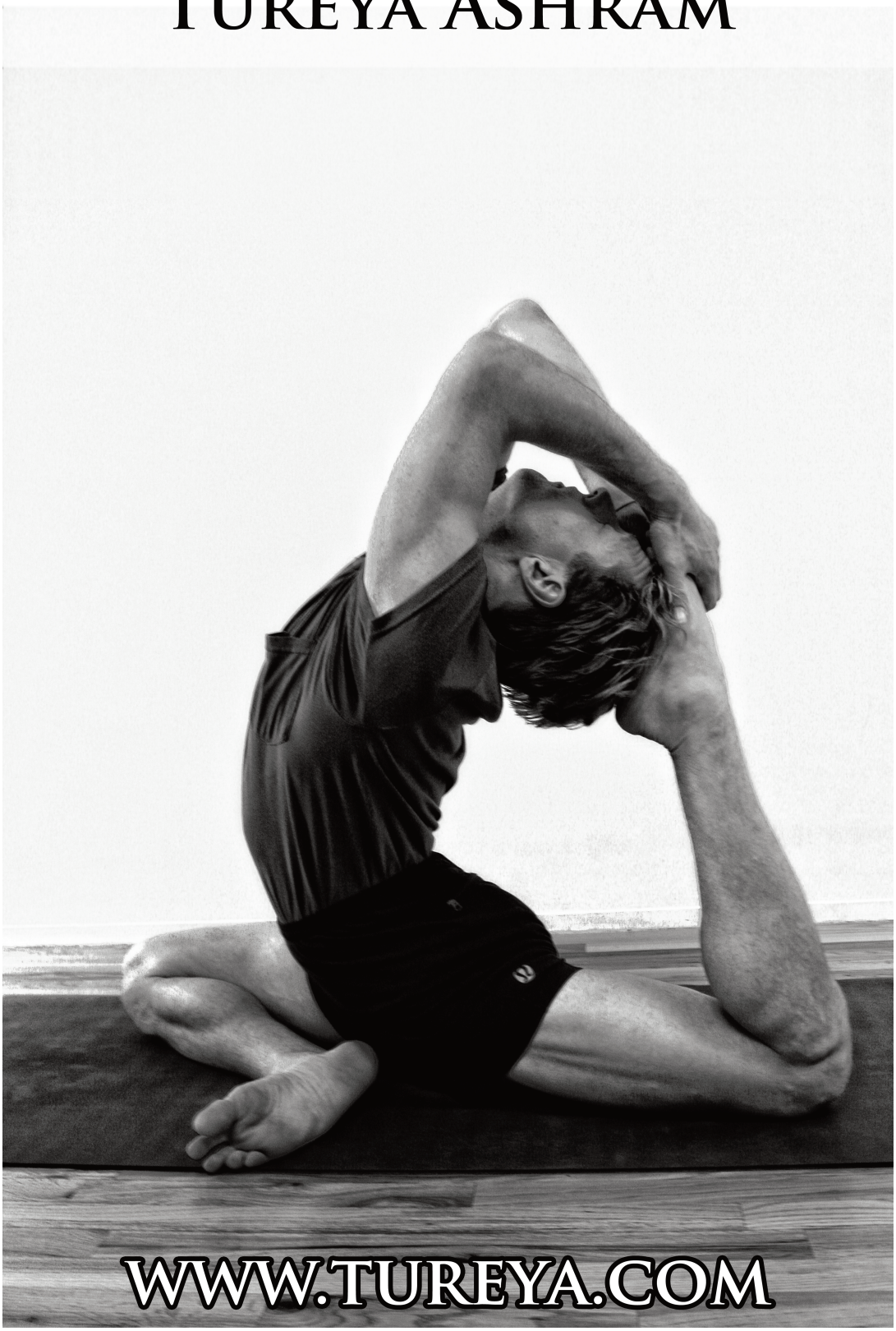

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Emotional Self: Perception, Reality, and the Continuity Between Them

By: Dr. Adam M Cohen

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"Life," says the *Chambers Concise Dictionary*, "is a state of being alive." Is that all? Indeed not! Continuing with the definition, life also contains "conscious existence" and especially for human beings "reflection" and any "number of opportunities of remaining in a game, career (etc.)." But what about the fundamental component of life we call emotions, defined as "feelings (and) sentiments, distinguished from cognition and will"? Do these not contribute to the way in which life is defined? Perhaps not for the botanical strata of existence, but even this topic is debatable. Realistically, emotions serve the whole gamut of purposes, from allowing for survival on a primitive level to manifesting profound experiences of love and compassion that inspire art and transform the soul.

While life may be sustainable without emotions – we have seen such possibilities to be true with patients with brain lesions that caused an 'absence' of emotions – who would, by choice, prefer to live such a life? Indeed, we could avoid the emotions associated with depression, anxiety, and fear, but we would also be missing out on some of the most beautiful features of life. Furthermore, it might be the very contrast between emotional highs and lows that allows us to be grateful and enjoy the 'positive' emotions so thoroughly.

It is true that some people would prefer to erase some emotions from their slate of experiences. Such topics have inspired the plots of books and movies including "Eternal Sunshine of a Spotless Mind". We also hear this idea discussed in real-life. Take for example a woman who has just lost her high school sweetheart, the one and only true love that she has known since her pubescent years, and the only one she could imagine being with. This loss for her might be so substantial that it will cause a state of depression so severe that many of the personality traits that defined her previously, such as joyous and enamored, have vanished from her field of emotional experiences.

Looking at it from a more optimistic perspective, there are also many instances in which emotional life experiences can create entirely new dimensions of understanding for our lives. It is for this reason that many colleges in the west encourage their students to travel abroad, with the idea being that the experiences in another culture will 'shock' the students into a new outlook on life and the way in which it can be lived. Some students even redefine their whole lives based around a single emotion they experience in a foreign country. Such stories are innumerable for a country like India. Take for instance Arther Avalon: once a student of the western world, Arther Avalon was so inspired by his experiences with Indian Tantra that he ended up renouncing the 'material life' and became one of greatest contemporary teachers on the subject.

While single emotions can totally alter the course of our lives, they can also be extremely temporal. Here, at the other end of the time spectrum, feeble emotions only last for as little as a fraction of a second, and come and go as quickly as a seed in the wind. A common example used in yoga is the experience of walking in the night and crossing a piece of rope on the road that is mistaken for a snake. On initial encounter, our body would become filled with fright and the thought to run or throw a big stone would cross our mind. But the moment we realize that it was simply a rope, our fear immediately passes and we chuckle at the thought that it was a snake. Although this example is often used to express the falsehoods of our perceptual experience, we can appreciate another truth which is revealed: our emotions can shift in a fraction of a second once our perception is adjusted to the dominant reality of our experience of the world. What may be true of our emotional experience in one moment may be drastically altered within the next.

It is therefore prudent to understand the scope and diversity of emotions, for they are tantamount to the uniqueness of every human being both in their thoughts and in their perceptions of life. As the famed contemporary artist Pablo Picasso stated, "Colors, like features, follow the changes of the emotions." Emotions not only shape our inner experiences of life, such as our thoughts and feelings, but also transform the way we look at the world.

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In essence, emotions help define the most characteristic qualities of human personality. They are both a way of expressing ourselves as well as our means of developing a perception of reality that accommodates our beliefs, thoughts, and judgments of the world and our experience of it. The descriptions "Jim is angry", "Susan is stubborn", and "Carl is gregarious" all suggest that a human being can be defined and identified by their emotions. While the question of "who is Jim" may not be limited to the fact that he is angry, the question of "what is Jim like?" will more than likely encompass the topic of how he has chosen to express himself by means of anger.

Emotions and Selfhood

Following from these speculations about emotions, we should therefore discuss whether or not emotions could form a definition of us as human beings. To begin this exploration, we should first ask the critical question of what are emotions? While many answers have been given throughout the years of philosophical inquisition proposed by some of the most predominant figures in history from Aristotle to Kant, the understanding that seems most prevalent to our investigation is the idea that emotions are feelings, sensations, and qualitative experiences that define the parameters of our subjective experience of life. This idea is similar to that of David Hume, the great philosopher of the 18th century, who believed that emotions are paramount to stimulating meaning and direction. More importantly, he went on to say that all experiences are emotion-based.

But I believe we can take this a step further by stating that emotions are essentially the foundation for our individuality, the qualities that underlie the complex and dynamic operations that distinguish us from one another. They are also coupled with reason and understanding that are definitive characteristics of the anthrop. For a moment, try to imagine life without emotions. If we did not 'feel', do you think that there would be motivation to act or even think? It seems that everything we do is promoted by emotions, whether it is taking revenge on someone by plotting a scheme to destroy them because they have wronged you or building a house with

your own hands to have a sense of achievement, our efforts and actions are endorsed by emotions. Sigmond Freud once said, “Flowers are restful to look at. They have neither emotions nor conflicts.” Even though this simplicity may be revered, it is also lacking sensations such as love, friendship, and fulfillment. Emotions are the fabric of our lives colored by the varying degrees of the interactions we have with the world around us. They contribute to both the trivial as well as the monumental moments in our lives. In fact, how could something be either trivial or monumental without an emotion to qualify it?

Moreover, emotions are not limited by space or time. On a spatial level, emotions can exists on the micro scale of a single human being and extend into a macro scale to encompass a general human temperament, such as the psychological connect of crowd consciousness. Take for instance the Second World War. Here we remember an event that caused a great deal of fear for many of the citizens around the world who were affected by the war. From Berlin to San Francisco, in one form or another everyone was impacted by the war and many possessed a sense of trepidation regarding the effects the war would have upon their lives.

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Time is also a contributing dynamism to the shape and disposition of emotions. Sometimes we experience emotions that are based upon our past actions and choices while at other times a forecast of our future emotions compels us to act. As Virginia Woolf once wrote, “I can only note that the past is beautiful because one never realizes an emotion at the time. It expands later, and thus we don't have complete emotions about the present, only about the past.” For Woolf, an emotion is aerial in the conscious mind when it is acting in the present. It is only when the emotion has matured from the past that she was able to grasp the full nature of the emotion and its significance for her life.

A common occurrence amongst the ‘modern consumer’ is thinking about future material gains . Many people base their whole lives around the single idea that they will be happy once they have acquired some specific object or place in society. Their present unhappiness is filled by the possibility of being happy in the future. This desire to acquire happiness and contentment in a future state in time is so strong for some individuals that they will perform some of the most illogical and immoral actions just to obtain something that may never come to fruition. But we see that it is not the objects themselves that are coveted, but the emotions that will be felt once that object or position is obtained.

Going Beyond the Black and White of Emotions

What should now be apparent is the importance emotions play in shaping our lives. They are not simply another human trait, but rather a foundational component of our existence, without which it is quite difficult to imagine a purposeful and even sustainable existence. Just think, for a moment, what compelled you to read this article. Perhaps first you started with a feeling of inquisition, where your mind felt receptive and ready to learn. So you started reading, and once you began to digest some of the information you realized that you could actually reshape your life by understand emotions. For us, there is the very real possibility of find a more pleasing state of living by working with our emotions. Or perhaps you are reading this article and developing a set of objections to what is being said, and believe something different to be true. Regardless, I would bet that your emotions have in one form or another contributed to your action of picking up this article reading, especially if you have come this far into the material.

For me, this article articulates my ideas, and the act of articulation itself is a form of expression that could arguably be derived from a set of emotions. It is my desire and passion to share wisdom, experience or to voice the ideas that I have accumulated through my own studies and interactions. True, we can have language void of emotions, but it is more likely that language itself was invented to express our emotive states and experience our unique understanding and experience the world. What is more probable is that there are many emotional states that are void of articulated language.

As many great minds have suggested, emotions are not the simple black and white vectors of a dualistic world but rather dynamic assets of human experience and existence. They are the flavors of life, sometimes sweet, sometimes bitter, but always exposing a sensation of the world that is unique to us and us alone.

This, then, can lead us to the question of can we affect our emotions? Are emotions built on a cause and effect relationship, the world being our stimulus and our body/mind being our reactionary experiential vessel, or can the mind in fact create an emotion which has yet to be experienced by us. This is a critical question, because much of religion and spiritual philosophy is founded upon this single ideology that emotions can be stimulated and created by the mind, a philosophy that is sometimes stated directly and sometimes not. Either through control in the 'moment' or reflection from experiences in the past, can emotions be observed, modified, cultivated, or even destroyed?

Spirituality is undoubtedly maintained by the assumption that we can create or destroy emotions; cultivating emotions like understanding, while dissolving those such as hatred and anger. Positive, nurtured emotions include compassion, understanding, and even enlightenment, and negative, discouraged emotions include lust, bigotry, and agitation. Now one might argue that some of the positive attributes we have mentioned are not emotions, but I think we can be assured that they are. This is because they create sensations within us that are characteristically defined by a sense of feeling. Take for instance enlightenment; even though it may not be immediately apparent , enlightenment can be seen as the highest form of an emotion because we are touching the steps of omnipotence and omnipresence. What is the state of omnipotence and omnipresence? It is the state of existence in which all is contained within itself, the Divine in its most humanly conceptual form. And what is the Divine? If we take some of the more general terms from religious philosophy we find the Divine or Spiritual Essence personified as possessing the qualities of compassion, nobility, justice, and love, just to name a few. In traditions that express these qualities, one who is considered saintly or prophetic represents the model form of human character and hence human emotions.

Furthermore, some spiritual philosophies propose that Truth is an aspect of creation that is void of emotions. This fundamental characteristic is believed to supersede all experiences and hence form the ambit of a state known as enlightenment. But what seems more plausible is an enriched state of experience of life that evolves our experience of life from the mundane to the supernal or at least an elevated state of living, one in which we not only feel connected to ourselves and the world on a deeper level but also acknowledge and understand the dimensions of our experience of life, one that is vastly shaped by the status of our emotions.

But perhaps we are extending too far, for it will undoubtedly be argued that there is a potentiality to experiencing the world with pure objectivity and rationality, free of any emotions.

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Both secular and pious groups can typify such a concept, science through objective observation and religion through its beliefs that many and most emotions adulterate life. As Lakshmi Mittal described it, "At the end of the day you have to keep emotions away." What she is suggesting is that emotions are the precursor to irrational, impulsive, and perhaps dangerous thoughts and actions. The Catholic Church in the Medieval Era also regimentally promoted the abolishment of many emotions including lust, greed, and passion. But such beliefs seem to misperceive the fundamental aspects of life with which emotions are inextricably interlinked. As modern research in learning has shown, the addition of emotional experiences to events we encounter in life is what makes them meaningful and hence memorable. Without emotional input, much of our valuable memories, both good and bad, would be vague if not entirely absent. Emotions serve not only as a vehicle for the subject experience of the world but also as a catalyst for the revelation of higher purposes that elevate our minds and enrich our perceptual experiences.

Returning to our question then as to whether or not emotions can be created in the mind, I think it is safe to say that we can indeed create an emotional state. As Oscar Wilde suggests, "A man who is master of himself can end a sorrow as easily as he can invent a pleasure. I don't want to be at the mercy of my emotions. I want to use them, to enjoy them, and to dominate them." Such can be achieved by mentally adumbrating the emotion we wish to master or cultivate. Next, by observing and molding our experience of an emotion, we can gradually reform our mental sensation and physical expression (behavior) of it. This modified form of an emotion through observation will in turn transform it into a heightened state of sensational and emotional experience. Eventually this new cultivated emotion becomes as natural as the sensation of happiness and sorrow, a new orientation to experience. Such is the skill of any good actor, like Camilla Belle who said: "Because I was able to submerge myself into the character, I didn't have to go back and forth. You don't have to work hard to bring out the emotion. It all just comes naturally, you're there living it." The emotion is no longer an externalized idea but an integral part of our character and personality.

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Applying this to spirituality: a Buddhist who proclaims that detachment from the world is essential to spiritual living would work on the emotional state of detachment, or disenchantment from the fluctuations of the world. If we were to embody this emotion, we would first want to describe the qualities of detachment: separation, disinterest, aloofness, and lack of bias. With this information, we could then reflect upon events and emotional states (returning to Virginia Woolf) in which we felt that we had the sensation of something similar to detachment. Perhaps one night our car was smashed by a tree that fell over after a heavy wind passed through the city. When this happened, instead of feeling upset or angry we simply accepted the movement of life and nature. With this knowledge, the next time a similar event occurred, or any event in which something detrimental occurred, we could use our previous experience of the 'detachment' as a model to improve our present state.

And even though Buddhists proclaim that living in the moment is the most profound experience that will, in and of itself, develop detachment, we cannot negate the significance of using our previous experiences in order to intentionally set up the foundation for our perceived emotional goal. This guided process of observing, behaving, and taking action will, in turn, shape the personality and characteristics of our emotions and experiences.

This brings us to a significant thesis on spirituality: it is not the renunciation of emotions that elevates us in our spiritual endeavors, but rather it is the evolution and transformation of our

emotions that reshape and exalt our experiences and outlooks on life. Rather than emotions becoming roadblocks on the path towards spiritual living, we are polishing them until our dominant emotions are those that bring us closer to the sensation of truth, understanding, and interconnectivity.

After this careful consideration of the value of emotions, who amongst us could honestly say that we would like to enter a state void of emotions? True, sorrow and remorse can be dismal and bewildering, but at the same time life would be meaningless without those emotions that drive us and propel our lives towards purpose and unity. As the Kabbalic philosophy suggests, passion and devotion are the highest forms of emotion that compel us to meet with the Divine and bring our soul into union with the supernal. This is only obtained through the vehicle of cultivated emotional experience.

It is therefore my intention here at the end of this discussion on emotions to ask the question as to whether we should sincerely integrate the aspects of emotions into our concept of spirituality or simply caste them to the wayside for the vultures of the past. What can we gain from the knowledge and experience that emotions provide within the contexts of our lives? Are they not as paramount to our mental and spiritual evolution as other valuable components of human life such as thoughts and perceptions? Could we embody a state void of emotions, and is this state even desirable if attainable? I leave these questions open with the hope that we may together explore the potentialities of our emotions in contributing to the advancement of our understanding and experience of the spiritual dimension of life.

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Psychosis and Human Society: a Historical Perspective

By: Dr. Stanislav Grof, M.D.

Yoga Psychology Magazine

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"The great progress that has been made in the realm of brain anatomy and pathological physiology and the general pre-possession in favor of natural science today have taught us to look, always and everywhere, for material causes, and to rest content once we have found them. The ancient metaphysical explanation of Nature was discredited on account of its manifold errors, so much so that the value of its psychological standpoint was lost."

C. G. Jung: On the Problem of Psychogenesis in Mental Disease.

"I got the kind of madness Socrates talked about, a divine release of the soul from the yoke of custom and convention. I refuse to be intimidated by reality anymore. After all, what is reality anyway? Nothing but a collective hunch."

Lily Tomlin in The Search for Signs of Intelligent Life in the Universe by Jane Wagner.

The concept of spiritual emergency is in conflict with the theoretical concepts and clinical strategies that dominate contemporary psychiatry. Strong dependence on the medical model and preference for biological explanations that characterize today's psychiatric practices result in a tendency to treat emotional disorders, in general, and more serious ones, in particular, as diseases. The role of psychological factors is acknowledged in certain limited and clearly defined domains, such as neuroses, psychosomatic diseases, and the "placebo effect" - the often surprising therapeutic influence of pharmacologically inactive medication. Psychological explanations of psychoses are discussed in psychiatric handbooks, more or less as historical curiosities.

In daily clinical practice of most psychiatrists, the medical model rules supreme; those who experiment with psychotherapeutic approaches in severe emotional disorders are rare exceptions. And the emphasis on the spiritual dimension of the human psyche, so crucial to the idea of spiritual emergency, is alien to mainstream psychiatric thinking. The current concepts and practices which dominate modern psychiatry, as well as their limitations and the controversies that surround them, can be fully understood only in light of the entire history of evolving views concerning unusual human experiences and behaviors. With this in mind, I would like to explore the approaches to severe mental disorders from a historical and cross-cultural perspective.

1. The Dawn of Psychiatry:

Metaphysics and Science In Ancient Cultures.

References to psychiatric disorders including psychoses can be found in the world literature since antiquity. Vivid descriptions of various states belonging to this category exist in China, India, Mesopotamia, as well as in various cultures in the Mediterranean area. During these times, the prevailing opinion was that these conditions were caused by possession by evil spirits and demons or that they represented deserved divine punishment. The respective treatment was then either exorcism or appeal to the punishing deity combined with appropriate gifts and offerings. Therapy was executed primarily by the priests.

While such a metaphysical understanding certainly prevailed in ancient cultures, it often co-existed with interpretations that can be seen as primitive precursors of scientific thinking. Also some of the treatment procedures and naturalistic remedies can be understood in scientific terms. Some of them have even served as direct inspiration for modern therapy, such as the rich pharmacopeias of antiquity.

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India.

Among the descriptions of diseases found in the Atharvaveda, one of the ancient Hindu scriptures, are various forms of insanity. This Veda also contains the appeals to gods, prescriptions for the exorcism of demons, and outlines of the magical rites considered appropriate for various conditions. However, the Indian Brahmans also used exposure of the mentally ill persons to cobras with extracted teeth to dispel the psychotic condition through overwhelming fear. They staged for the same purpose faked attacks by elephants trained to stop in the last moment, or they surprised the mentally disturbed by a sudden fall into cold water. The therapeutic psychodrama arranged for important persons involved such complex ploys as arrest by the royal guard, sentence to death, and the king's "pardon" granted in the last minute.

The efficacy of these procedures can easily be understood if one sees them as precursors of "shock therapies," that dominated modern psychiatry until the psychopharmacological revolution in the 1950s. They also make sense in view of the observations from experiential psychotherapies indicating that confrontation with death, in this case staged by one's own unconscious, has profound therapeutic effects. But the treatment strategies in ancient India were not limited to the above psychological means; they also included an amazing pharmacopeia. Of the many medicinal herbs, two deserve special attention. A plant with psychedelic properties, whose identity was lost in the course of time, received much attention in the Rigveda and was considered so powerful that it was given the name of a god, Soma. The Ayurvedic plant Rauwolfia serpentina used for treatment of insanity, one of the 500 herbs mentioned in the ancient Charaka Samhita, became the source of reserpine, an important prototype of modern tranquilizers.

China.

Similarly, in ancient China, the understanding of diseases, physical as well as mental, was based on the belief in gods and demons as the effective causes. Texts scratched on oracular bones from the Shang period (1766-1122 B.C.) petitioning gods for help give numerous examples indicating that refuge from suffering was sought in magic and exorcism. Clay figurines from the time of the Han dynasty that ruled China during the centuries around the birth of Christ represent shamans who were believed to posses power capable of combating mental disease.

This tradition coexisted with naturalistic practices, which represented a unique and highly original blend of metaphysics and concrete pragmatically valid interventions. The origins of traditional Chinese medicine can be traced far back into history. The worldview and the way of thinking that characterizes this system of healing are very different from and incompatible with the philosophy of Western science. Its approach was holistic and emphasized disturbances of energy flow in the body underlying physical and mental problems, rather than pathology of individual organs. For this reason, Chinese medicine did not distinguish sharply between physical and mental diseases; they were considered to be different manifestations of the disturbed energetic equilibrium.

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The philosophy underlying traditional medicine in China saw the universe as a complex interplay of five elements or cosmic principles: fire, earth, metal, water, and wood. These governed various events in the macrocosm, as well as the functioning of the human body and mind. Elaborate maps were used depicting a system of meridians, or channels for the flow of chi, or subtle cosmic energy, through the body. In the last analysis, however, the elements and chi were just specific manifestations of one transcendent universal principle, the Tao, and its polar components, yin and yang.

Beside an elaborate pharmacopeia, Chinese physicians used acupuncture - application of cold or hot needles to various points lying on the body meridians - to open the energy flow and reestablish dynamic equilibrium. The choice of the acupuncture points was not specific for diseases in the Western sense, but was based on the results of a diagnostic procedure assessing the overall energetic situation. However, there existed certain specific acupuncture points believed to reinstitute emotional equilibrium of severely disturbed patients. The pragmatic value of acupuncture has been confirmed in modern times, although the reasons for its efficacy remain incomprehensible from the Western scientific point of view.

Egypt and Mesopotamia.

The ancient Egyptians also believed that disease and insanity were the results of attacks by evil demons and spirits. The methods of healing used by priest - healers consisted in magical and religious rites aimed at expelling the malevolent entities that had caused the condition. Incantations, prayers, and sacrifice were the most important therapeutic tools of the time. An important institution in ancient Egypt were the procedures known as temple mysteries; most famous of these were the death - rebirth mysteries associated with the names of Isis and Osiris. Although their purpose was primarily spiritual transformation, their beneficial effects included also emotional and psychosomatic healing.

Like India and China, Egypt had a rich pharmacopeia with many plants whose effects have been validated by modern science. Especially significant among them was poppy, which was used for opium - induced therapeutic sleep. It is interesting to mention in this context that treatment of depression by opium tincture belonged to popular practices of European psychiatry in the early decades of the twentieth century. The Mesopotamian cultures, Assyria and Babylonia, resembled Egypt in practicing a similar mixture of metaphysical and naturalistic healing.

Greece and Rome.

In ancient Greece, the cradle of Western civilization, the situation in regard to emotional disorders was particularly interesting and complex. Greek literature abounds in descriptions, both artistic and scientific, of various forms of insanity, and scenes representing mental derangement are depicted on ancient vases. Popular concepts of "madness" involved belief in supernatural causation, particularly possession by the dread goddesses Mania and Lyssa, sent by other angry deities. In addition, the goddess Artemis was said to inflict nervous and mental disorders and a similar role was also attributed to the underworld deities who were held responsible for madness, hysteria, epilepsy, and various neuroses. The gods frequently communicated with mortals through oracles, dreams, and visions. The treatment based on these beliefs was naturally prayer to the appropriate deity supported by gifts and offerings.

The above situation is in sharp contrast with the fact that the same ancient Greece generated much knowledge of scientific relevance and is often referred to as the cradle of modern rational medicine and psychiatry. This concept is not quite accurate historically, since it ignores the fact that naturalistic medical practices had existed in many earlier ancient cultures and that Greece inherited much from Babylonia and Egypt, and even from India and China. However, it is indisputable that it was in Greece where the first systematic effort was made to formulate the principles of medical understanding of mental disorders.

Already in the 5th century B.C., the Greeks made the first attempts to develop an approach based on natural sciences which marked the beginning of biological psychiatry. At this time, the Pre-Socratic philosopher and physiologist Alcmaeon of Crotona conducted the first autopsies and concluded that the seat of reason and soul was the brain. In the 4th century B.C., the famous Greek physician Hippocrates formulated a theory according to which the human body contained four basic fluids or "humors"- blood (sanguis), yellow bile (cholon), black bile (melancholon) and phlegma. He suggested that they played an important role in determining temperament and that imbalance among them was the cause of diseases including mental aberrations. Hippocrates also initiated therapeutic use of emetics, laxatives, and blood-letting (venepuncture), procedures that constituted main psychiatric treatment all through the Middle Ages. Two centuries later, another renowned physician, Asklepiades from Asia Minor, added to this triad hydrotherapy, diet, and physical exercises together with occupational and music therapy.

The Greek genius also made valuable contributions to the psychological understanding of the mind and mental illness that have not lost their relevance even in modern times and are being rediscovered by contemporary psychology. The Greek understanding of dreams and work with them predated Freud by millennia and even included the use of free associations by Artemi-

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doros of Daldianus. Plato's discussion of the four kinds of madness that he attributed to possession by deities (or in Jung's terminology archetypal beings) - ritual, poetic, erotic, and prophetic - are of great interest to modern students of psychoses.

A special form of treatment which was very popular in ancient Greece was temple sleep or ""incubation". After purification rites and abstinence from wine and food, the supplicant slept on the hide of the sacrificial animal in the portico of the healing temple near the image of the deity. In some instances, healing occurred through the direct intervention of the deity in the sleep, other times the suggestions for treatment came in the form of a dream. In modern times, temple incubation has attracted attention of the Jungian circles and its effects have been interpreted in terms of archetypal psychology.

Another important institution were the mysteries of death and rebirth that existed in ancient Greece in many varieties, such as the Eleusinian mysteries, the mysteries of the Korybants, the Orphic cult, the Bacchanalia (or the rites of Dionysus), and the mysteries of Attis and Adonis. Like the Egyptian mysteries of Isis and Osiris, they were a combination of a spiritual procedure and a healing ceremony. Both Plato and Aristotle left positive testimonies about the therapeutic impact of the powerful and disorganizing experiences of the initiates in these mysteries. The healing and transformative potential of the ancient mysteries, as well as some of the psychological mechanisms involved have now become understandable in view of the findings of modern consciousness research and experiential psychotherapies.

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The Greek ideas continued to have considerable cultural influence in the ancient world during the centuries around the birth of Jesus, in spite of the fact that the political power was seized by the Roman Empire. Although some exceptional individuals, such as the physicians Celsus and Galenus or the politician - philosopher Cicero, made certain original contributions to the understanding of mental disorders, Roman popular and medical concepts of madness, as well as literary writings on the subject, were variations on the Greek themes.

Two great physicians of the time, Aretaeus of Cappadocia and Soranus, laid the foundations for the treatment and management of mentally - ill based on humanitarian principles. They emphasized gentleness, tact, and discretion in the interaction with them and the need for contact and supervision during convalescence. The last contribution of the ancient world to psychology were the writings of St. Augustine, generally considered the greatest introspective mind before Freud. Although he was not specifically interested in mental disorders, his observations in this regard were of great importance. They included the recognition of the relevance of sexuality as a force influencing the human psyche and an early version of the concept of the unconscious.

2. Heretics and Saints : Medieval Approaches to Psychoses.

The fall of the western part of the Roman Empire in 476 A.D. signaled the beginning of a new historical era, the Middle Ages. During this period lasting almost 1,000 years, there was very little progress in the exploration of the human mind in health and in disease. During this long time no major contributions were made in either the biological or the psychological understanding of psychoses. Among the few exceptions were the Christian philosopher Thomas Aquinas and theologian - scientist Albertus Magnus who described various psychotic symptoms

and types of mental patients. The theory of psychopathology which they developed postulated that insanity was primarily a somatic disturbance; however, this was based on the theological assumption that the soul could not become sick.

By and large, the medieval era represented a dark period in the history of humanity in general and psychiatry in particular. At the height of the Middle Ages, mental patients were locked in gloomy dungeons together with common criminals, condemned by society to jails or the unbelievably gruesome conditions of lunatic asylums. "Treatment" consisted of painful physical procedures, such as whipping, burning with hot iron, use of caustic ointments, immersion in cold water, placing ants under the clothes, exposure to sharp odors, and interference with sleep.

Additional problems for people with various mental disorders were generated by the political and religious turmoil of the time. The period preceding the ultimate decline of feudalism gave rise to a number of heretic movements and to collective frenzy expressed in ecstatic dancing with frank sexual and aggressive elements. At the same time, the feudal idealization of woman carried by the troubadour tradition was rapidly disappearing. With the decay of medieval institutions woman began to emerge as a dangerous tempting and seductive being who, from the time of the original sin, had been possessed by the devil and whose ultimate goal was the destruction of man.

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The Church responded to this situation by a witch hunt of unprecedented proportions. In 1487, Pope Innocent VIII. issued a bull that officially accepted the belief in demons; it referred to men and women practicing witchcraft and causing sterility, impotence, disease, famine, and murder. Three years later, two Dominican monks Sprenger and Kramer, sent by the pope to Germany, wrote the book "Malleus Maleficarum" or "Witches' Hammer" that inseparably linked mental disorders and witchcraft for the centuries to come. This horrible document became the standard reference for Church and state alike in regard to the assessment of all unusual experiences and behaviors, as well as matters concerning the investigation, indictment, trial, judgment, and punishment of alleged witches.

In the resulting atmosphere of collective metaphysical paranoia, large numbers of people with various forms of psychopathology and those who had what we would now call transpersonal experiences or spiritual emergency were accused of witchcraft or possession by the devil. They were exposed to unimaginable tortures by the Holy Inquisition that saw such drastic procedures as legitimate means to elicit confessions of liaison with the devil and to save the souls of witches and satanists from damnation and the horrors of hell. According to historical estimates, as a result of these trials, hundreds of thousands and possibly millions of people were killed, tortured to death during the investigations, hanged, or burned at the stake of the infamous autos-da-fe. These hideous witch trials continued until the eighteenth century in spite of occasional attempts of enlightened physicians, such as Paracelsus, Johannes Weyer, and Thomas Sydenham to replace these practices by medical considerations and procedures.

In comparison with the countless unfortunates who ended up as victims of the Inquisition, there were a few who found a different fate; their unusual experiences were seen as being of divine origin and they became sanctified by the Christian Church. St. Teresa of Avila and St. John of the Cross can be mentioned as examples of this category. The arbitrary nature and capriciousness of the process that assigned people to the group of witches or saints can be exemplified

by St. Joan of Arc. She was tried in 1431, found guilty of witchcraft and burnt at the stake, but twenty-five years after her death this judgment was annulled. Nearly five centuries later, in 1909, Joan was beatified and in1920 canonized by the Roman Catholic Church.

During the medieval era, the Greek ideas continued to flourish in the Arabian countries and had a strong influence on their cultural life, resulting in a much more humane treatment of the mentally ill than Europe. Between the 9th and 13 th centuries, many asylums were built in the Middle East where mental patients received humane and enlightened treatment. These facilities were located in charming gardens with fountains, featured a very relaxed atmosphere, and their therapeutic regimen included special diets, baths, drugs, fragrant oils and perfumes, as well as concerts of soothing music.

3. Western Science and Psychoses: the Search for Diagnoses.

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As Western society was emerging from the Middle Ages and was leaving their sad legacy behind, the situation of the mentally ill started to change. The revolutionary and humanitarian trends that were spreading through the society found their way into the darkness of the insane asylums. This movement culminated in the work of Philip Pinel, who at the time of the French Revolution started to liberate mental patients, which in many instances literally meant removing manacles and chains from their bodies. At the same time, scientific interest began to replace religious fanaticism in the approach to mental disease.

In the middle of the nineteenth century, there began to crystallize or the first time in history of medicine a keen interest in scientific classification of mental diseases. From the very beginning, these efforts involved a passionate controversy between two camps - one that wanted to differentiate these disorders according to symptoms and another that emphasized causes as the crucial criterion. The argument of those who advocated the division by presenting symptoms was clear: very few causes for emotional disorders were known and hypothetical assumptions about etiology simply were not a solid foundation for grouping of mental illness. Those who emphasized causes, on the other hand, insisted that in medicine a good classification must always be based on etiology. This second group had to make certain assumptions about the origins of mental illness and found itself immediately in the midst of another dilemma: Were all mental disorders due to organic diseases of the brain (or of some other part of the body indirectly influencing the brain) or was it possible that some of them were "functional", that is not related to biological damage, or even resulting from purely psychological causes?

Let us first follow the history of the struggles for classification of psychoses by symptoms. Here the pioneering role was played by the German psychiatrist Emil Kraepelin, who is to this day considered the father of modern psychiatric classification. At a historical meeting of the South German Psychiatric Association that took place at the end of the nineteenth century in Heidelberg, Kraepelin presented his classification that distinguished two basic forms of psychoses, dementia praecox, literally premature dementia, ending eventually in mental deterioration, and manic - depressive psychosis which left the personality of the patient intact.

Although Kraepelin's classification was generally accepted after initial opposition, it presented certain problems. Kraepelin himself admitted that many of his patients showing the symptoms of dementia praecox did not end in deterioration; they manifested what could be described as "dementia praecox sine dementia" (dementia praecox without dementia). It also became clear

that the final outcome of the process was not a sound criterion for classification; the psychiatrist would have to wait for years for the final diagnosis. In addition, the emphasis on dementia created a very pessimistic and defeatist framework for treating psychotic patients.

This unpleasant impasse was overcome by the Swiss psychiatrist Eugene Bleuler who in 1911 came up with a new name and a new conceptualization of the problem, influenced by reading Sigmund Freud's first book Studies in Hysteria. Bleuler's term "schizophrenia" replacing dementia praecox emphasized as the central feature functional characteristics rather than the final outcome of the process. He also suggested that schizophrenic symptoms could manifest both in the context of a disease or as a psychopathological reaction to various situations. Consequently, he expected some patients to deteriorate and others to recover with or without defect.

In Bleuler's system, schizophrenia was subdivided into four types; three of these were identical with Kraepelin's forms of dementia praecox- hebephrenic, paranoid, and catatonic. Bleuler himself added the fourth type - simple schizophrenia. These four types shared certain common features and differed in their specific manifestations. Among Bleuler's fundamental contributions to psychiatry was the formulation of criteria for the diagnosis of schizophrenia and its differentiation from other psychoses. He pointed out that such manifestations as hallucinations, delusions, stupor, or negativism were not sufficient for the schizophrenic label; this required the presence of what Bleuler considered to be "primary symptoms".

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The first of these was a specific and characteristic disorder of the thought processes manifesting in unusual associations. Another critical feature was incongruence between the content of thoughts and the accompanying emotions, resulting in inappropriate reactions to situations. Bleuler talked here about dissociation between thought and affect. Among the primary schizophrenic symptoms was also withdrawal into the fantasy world and autism. And the last of these was strong emotional ambivalence leading to conflicting impulses and indecision. Bleuler's definition of schizophrenia and his classification system have survived with minor modifications until the present day.

Modern psychiatry divides psychotic reactions into two large categories. In the first of these are organic psychoses - conditions caused by physical changes in the brain or in the body that can be detected by the existing clinical and laboratory techniques. Typical examples of this category would be psychological changes accompanying degenerative processes, cardiovascular disorders, infections, intoxications, and traumatic afflictions of the brain, typhoid fever or uremia. These belong unquestionably into the domain of medicine and are of little relevance for the problem of spiritual emergency. What interests us in this context is the second category of reactions, referred to as functional psychoses; these lack any known specific organic basis detectable by today's laboratory methods.

Here belong above all schizophrenic reactions of all four types described above (schizophrenia simplex, hebephrenica, paranoides, and catatonica) and a mixed form called undifferentiated schizophrenia. Simple schizophrenia is characterized by a gradual loss of interests, ambitions, and initiative. As the personality slowly disintegrates, the person shows neglect for appearance, hygiene, and basic duties; there is a strong tendency toward withdrawal and social isolation. Hebephrenic schizophrenia involves a marked regression to primitive, disorganized, and uninhibited behavior that can look like a caricature of manners observed during puberty, such as grinning, grimacing and inappropriate outbursts of laughter. Paranoid schizophrenia usually

shows less regression, has greater ego resources, and is socially better established. Patients with this form of psychosis can have hallucinations and delusions of persecution and grandeur. Their general attitude is suspicious and often aggressive. Their intellect typically remains surprisingly intact outside of the area of delusions. And finally catatonic schizophrenia has as its most characteristic feature extreme changes in motor behavior which can range from complete inactivity and stupor to severe agitation. Catatonics can also show various bizarre forms of behavior; they repeat sentences they hear from other people (echolalia), imitate in a mirror-like fashion their movements and gestures (echopraxia), or maintain for many hours various unnatural postures (flexibilitas cerea, waxy flexibility). They might not respond to ordinary speech, but react to whispering or to orders given in a military tone. In the past, patients of this kind contributed to the grotesque atmosphere of locked wards of psychiatric hospitals. Undifferentiated schizophrenia shows symptoms of several of the "pure" types and cannot be clearly assigned to any of them.

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Another group of functional psychoses is the manic-depressive variety, characterized primarily by dramatic emotional changes. Depressive phases of such reactions involve deep sadness, difficult and slow thinking, and general inhibition of activity. The manic phases represent the polar opposite in that they are euphoric, with accelerated thinking and talking, and an uncontrollable drive for action. The official classification distinguishes also paranoid reactions which differ from schizophrenia. The most important characteristics of these conditions are intact personality, as well as emotions and behavior that are consistent with the nature and content of the delusional ideas. These delusions are usually persecutory, grandiose, jealous, or erotic.

4. Medicine Versus Psychology: Dispute About the Causes and Treatment of Psychoses.

The attempts at understanding the causes of psychotic states and finding appropriate treatments have divided professionals into two groups with fundamental differences of opinion. Toward the end of the nineteenth century and in the first decades of this one, a passionate controversy developed between those who believed that all major mental disorders were due to physical diseases of the brain, or various organs of the body, and others who saw them as results of a dynamic psychological struggle or some kind of serious conflict. This debate between the biological and psychological orientation in psychiatry and the nature/nurture controversy has continued until the present day.

In the course of its history, psychiatry has become a subspecialty of medicine. For all practical purposes, the biological orientation has dominated the field. Mainstream conceptual thinking in psychiatry, the approach to individuals with emotional disorders and behavior problems, the strategies and financing of research, and basic education and training are all dominated by the medical model. This situation is a consequence of two important historical developments. Medicine has been successful in establishing the cause and finding effective therapy for a relatively small group of mental abnormalities which have a clearly organic basis. In addition, it has demonstrated its ability to control symptomatically many of those disorders for which specific etiology and therefore causal treatment could not be found.

The Cartesian-Newtonian thinking dominating Western science that proved to be extremely effective in physics and had a powerful influence on all the other disciplines, played a critical role in the development of neuropsychiatry and psychology. The renaissance of interest in mental disorders in the nineteenth century firmly established psychiatry as a medical discipline. Rapid advances in anatomy, physiology, pathology, chemistry, and microbiology resulted in a determined search for organic causes of all mental disorders in the form of infections, metabolic disturbances, vascular changes, or degenerative processes in the brain and elsewhere in the body.

This biological orientation in psychiatry was inspired by the discovery of the causes of several mental disorders that led to effective therapeutic measures. A prime example of this was general paresis, a condition associated among others with delusions of grandeur and serious disturbances of memory and intellect. Here the discovery that this disease was the result of tertiary syphilis of the brain, a disease caused by the protozoon Spirochete pallidum, was followed by successful treatment combining artificially induced fever (pyretotherapy) and administration of preparations containing arsenic and mercury. Similarly, once it became clear that mental disturbances associated with skin problems and gastrointestinal symptoms (pellagra) were due to deficiency of a certain vitamin of the B group (vitamin B6 or pyridoxin), it became possible to correct them by an adequate supply of the missing vitamin. Some other types of mental dysfunctions could be linked to encephalitis or meningitis, arteriosclerosis, various forms of malnutrition, degenerative changes in the brain, and cerebral tumors.

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These initial successes spurred enthusiastic search for biological causes of other mental disorders, particularly psychoses. The scientists pursuing this avenue of research were convinced that psychotic states represented such a drastic distortion of "objective reality" that one had to assume some serious damage to the organs involved in the perception and testing of reality, particularly the central nervous system. This conviction was the moving force behind countless studies looking for specific causes of psychoses, such as genetic factors, constitutional dispositions, anatomical and neuropathological anomalies, endocrine disturbances, autoimmune reactions, viral and bacterial infections, and biochemical deviations.

Many hypotheses have been formulated and tested over the years, but the results have been generally inconclusive and disappointing. Except the increased incidence of psychoses among the relatives of psychotic patients, which is a fact open to various interpretations, no findings have been sufficiently constant to provide adequate etiological clues. The successes of unraveling the causes of serious mental disorders have been isolated and limited to a very small fraction of the problems that psychiatry deals with. The causes of the majority of psychotic episodes continues to be a mystery. With the privilege of hindsight, we can say that it was somewhat premature to commit psychiatry so exclusively to the medical model, particularly since this development has not been without serious problems.

The failure of the biological approaches to demonstrate the organic nature of most psychotic states and of many other emotional and psychosomatic disorders encouraged the development of psychological schools of psychiatry. These have been exploring the possibility that the origin of such disturbances might be in the patients' life history and in various emotional traumas and conflicts. For all practical purposes, this avenue of research began with the epochal discoveries

of Sigmund Freud and his disciples. Freud him-self made the first major attempt at psychological understanding of psychoses in his famous analysis of the autobiographical diary of judge Schreber who had suffered from paranoia.

Freud's followers, such as Karl Abraham, Victor Tausk, Melanie Klein, and others developed systematically Freud's original idea that psychotic experiences represent a regression into early infancy and emergence of repressed traumatic memories and conflicts from that time. In addition to psychoanalytic theories, that interpret the problems of psychotics in terms of conflicts within the psyche, there have been others emphasizing the role of the interpersonal relationship with the mother and other family members in the genesis of mental disorders. The extensive studies on "schizophrenogenic mothers" and Harry Stack Sullivan's interpersonal theory can be mentioned here as salient examples.

Considerable attention was also paid to the overall climate in the family. In this context, the entire family system was seen as pathological and the psychotic was just the "identified patient" (IP), the person in whom the problems found the most dramatic expression. This approach was particularly characteristic for the research group at the Mental Research Institute (MRI) in Palo Alto, California, headed by generalist Gregory Bateson, author of the famous "double bind" theory of schizophrenia. Ruth and Theodore Lidz at Yale University conducted a meticulous in-depth study of all the members of sixteen families of schizophrenic patients. These attempts at psychological understanding of psychoses also led to the development of important psychological alternatives to biological therapies that ranged from psychotherapy with individual patients to systematic work with their parents and entire families. Frieda Fromm-Reichmann, Renee Sechehay, John Rosen, and Jacob Moreno deserve special notice in this regard.

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The psychological approaches to psychoses, however fascinating, did not have significant impact on mainstream psychiatry. As long as their interpretations remained limited to postnatal biography, they were not really convincing. The depth and intensity of the emotions observed in psychotic states, such as anxiety of cosmic proportions, murderous aggression, violent self-destructive impulses, or abysmal guilt, seemed too enormous to reflect the distress of a hungry or lonely infant. An even more serious problem was the abundance of fantastic themes in the experiences of psychotic patients. Among these were scenes of destruction of the world and its recreation, visions of hells, heavens and divine lights of supernatural beauty, encounters with deities and demons, and complex sequences staged in other times and countries, or even extraterrestrial settings. It would require a big stretch of imagination to assume that these were products originating in the infantile psyche.

One of the early pioneers of psychoanalysis, Freud's disciple and renegade Otto Rank, formulated a psychological theory that - unlike the speculations of his teacher and his colleagues - could account for the extraordinary intensity of psychotic emotions. According to him, the psychological history of the individual did not start after birth, but included prenatal existence and the traumatic experience of birth itself. Although Rank himself put more emphasis on the loss of the security of the womb than on the emotional and physical trauma associated with the passage through the birth canal, biological birth is - at least potentially - a life-threatening event. It could thus be a likely source of immensely intense emotions.

Rank's theory, however plausible, had little influence on academic circles, since it challenges the traditional medical belief that --because of the unfinished myelinization of the neurons in the neocortex-- the brain of the newborn is not sufficiently mature to be able to record and retain memories of this event. In the last two decades, prenatal and perinatal research dispelled this objection and experiential therapies brought powerful support for Rank's ideas. However, even Rank's system could not give convincing explanation for the rich, complex, and extraordinary content of psychotic experiences and for the fact that they have often a strong mystical emphasis. This task had to wait for transpersonal psychology, particularly the work of Carl Gustav Jung.

5. Re-Visioning of Psychiatry : Transpersonal Understanding of Psychoses.

Transpersonal psychology as such did not come into being as a separate discipline until the late 1960s; however, important developments within psychology that had all the essential characteristics of a transpersonal approach had preceded it by many decades. The most influential early pioneer of this movement was Carl Gustav Jung. His prolific writings provided the conceptual framework necessary for understanding some of the most puzzling aspects of non-ordinary states of consciousness. The cornerstones of his theory - the concept of the collective unconscious, discovery of its primordial organizing patterns or archetypes, and recognition of the mythological nature of the human psyche - represent a solid foundation for a comprehensive approach to mystical as well as psychotic phenomena.

Jung's interest in the area of spiritual crises and psychoses was not purely academic. As he so vividly described in his autobiography Memories, Dreams, Reflections, he had struggled in the course of his long life with many dramatic and challenging spontaneous experiences. Of particular interest was an episode that involved perception of and communication with spirits shared by other members of Jung's family. During this time, Jung wrote what is probably his most remarkable work, Septem Sermones ad Mortuos (Seven Sermons to the Dead), a channeled text signed by the Gnostic philosopher Basilides from ancient Alexandria. Jung is a fine example of how a gifted and creative individual can use difficult trans-personal experiences - a spiritual emergency - for his personal growth and for great benefit of others.

Jung's contemporary, Italian psychiatrist and psychoanalyst Roberto Assagioli, developed independently an original system of transpersonal theory and therapy called psychosynthesis. Like Jung, he recognized the existence of the collective unconscious and appreciated the role of spirituality in human life. It is very significant in regard to the concept of spiritual emergency that Assagioli was well aware of the fact that many states diagnosed and treated as mental diseases are actually crises of spiritual awakening. He addressed this problem in his essay entitled Self-Realization and Psychological Disturbances, in which he discussed the difficulties that often precede, accompany, and follow a powerful spiritual opening.

Another important contribution to transpersonal understanding of non-ordinary states came from the work of the famous American psychologist Abraham Maslow. Maslow conducted a large study of people who had had spontaneous mystical states, or "peak experiences" as he called them. Maslow's research showed that traditional psychiatry was in error diagnosing such conditions as mental diseases and treating them with routine suppressive medication. According

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to him, peak experiences often occur in otherwise healthy individuals and when they are allowed to complete themselves they are conducive to "self-actualization" or "self-realization" - a fuller development of one's potential. The work of Jung, Assagioli, and Maslow has attracted many dedicated followers and received high esteem in transpersonal circles, but has remained on the periphery of academic psychology and psychiatry.

Although comprehensive in itself and in accord with the entire cultural history of humanity, transpersonal psychology meets strong resistance among traditionally educated scientists. Its wider acceptance will have to wait until the time when the revolutinary developments in modern science replace the Newtonian - Cartesian thinking with which transpersonal psychology is in principle incompatible. It is very exciting and encouraging to see the emergence of many revolutionary advances of modern science that have been referred to as the "new paradigm" (quantum-relativistic physics, information and systems theory, the holographic model of the brain and the universe, the theory of morphogenetic fields, and many others). While they seriously question and undermine the most fundamental assumptions of seventeenth century thinking that still dominates mainstream science, they are all compatible with the transpersonal perspective.

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6. Existentialism and Antipsychiatry: Radical Challenges to the Medical Model.

Having reviewed the history of opinions about unusual experiences and behaviors, we should at least briefly mention certain developments that challenge the basic foundations of psychiatry by denying the very concept of psychopathology. Thus phenomenology, based on the work of the German philosopher Edmund Husserl and represented by such names as Ludwig Binswanger and Medard Boss, altogether refuses the disease concept of psychiatry. According to this view, insanity is nothing more than exaggeration of the individual's habitual character, psychosis is simply a different way of being in the world, of Dasein. The patient exists in a reality of his or her own which cannot be fully shared by people who are oriented to "common sense" standards and values.

Thomas Szasz, an outspoken critic of the disease concept of emotional disorders, goes even further. In his controversial book, The Myth of Mental Illness, he denies psychiatry the right to assign pathological labels to people who have unusual experiences and behaviors and treat them as patients. He suggests that psychiatry in assuming the right to judge the appropriateness of human experience and to drastically limit people's freedom and modifying their behavior acts essentially like the medieval Inquisition.

The dynamic and radical Scottish psychiatrist R.D. Laing believed that the situation in regard to psychotic patients is severely distorted. According to him, it is actually modern human society that is dangerously insane and the psychotics, finding its values unbearable and unacceptable, withdraw into the inner world of fantasy. Laing was strongly opposed to psychiatric interventions of any kind and preferred that the process take its natural course. He believed that in the current state of the art psychotics have more to teach their psychiatrists than the doctors have to offer their patients.

The extreme expression of the above trends is the movement of antipsychiatry, founded by the rebel British psychotherapist of South African origin, David Cooper. Cooper, who had personally experienced in his life profound spiritual and bodily crises that took the form of death and rebirth, came to question the value of psychiatric interventions altogether. The choice of the name "antipsychiatry" is unfortunate, since it directs more energy into disqualifying traditional psychiatry than into suggesting and developing better alternatives. Cooper's philosophy has become the ideological basis for various movements of former psychiatric patients who feel bitterness about the way the current system has treated them and seek various forms and degrees of retribution.

Conclusions from the Review of the History of Psychoses.

After this brief excursion into history, we can now summarize the present situation in psychiatry concerning the so called functional psychoses. Despite enormous investment of time, energy, and money, the problems related to the nature and origin of these conditions have successfully resisted combined efforts of scientists from many different disciplines for many decades. The theories of psychosis cover an extremely wide range from strictly organic to purely psychological and even philosophical. Within both the biological and depth-psychological camp, there exists an enormous plethora of theories and therapeutic approaches.

If anything characterizes the overall situation, it is an amazing variety of opinions and lack of agreement on the most fundamental issues. In view of this situation, adding yet another perspective on psychosis - the concept of spiritual emergency - to the plethora of those that exist already does not violate any sacrosanct knowledge that has been proven beyond any reasonable doubt and is generally accepted. The highly rewarding results of this new approach to the understanding and treatment of non-ordinary states of consciousness more than justifies this effort.

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It's a Mad Hatter's Tea Party

By: Victor MacGill

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Is reality all it's made up to be?

When Alice entered Wonderland and came across the mad hatter's tea, she thought she was just coming across an ordinary tea party, but it soon became apparent that not all was as it seemed. Life is a bit like that too. Our world seems ordinary until we look a bit closer. When we do, we find a strange world that leads us on an exciting adventure every bit as weird and wonderful as Alice's adventures.

We seem to be separate beings in a real world, which we experience as it is. Traditional Christian beliefs reinforce this view of reality. It tells us of an external God who creates a universe apart from himself at a single moment in time and then placed man in it as a special and separate creation from the rest of nature. This viewpoint has pervaded western society and is deeply entrenched in our psyche.

From that perspective, it is only natural that we see the world out there as a real on its own right and us, living in it, as real in our own right. It seems obvious that the trees, rocks, vehicles and buildings are real objects that are out there just as we see them. Similarly, it is easy to see ourselves as real, separate beings. I feel my heartbeat, see my limbs and feel the pain when I bump into something. Appearances can be deceptive, however, and when we take a closer look at what seems obvious, we find things are not necessarily as we might have imagined.

Natural Selection

We evolved through natural selection. Any creature that has qualities that make it more adaptable in its environment is more likely to survive. Over generations, the more adaptable tend to survive, so the whole species tends to become increasingly adapted over time. As well as this, each creature only has a certain amount of energy available to it because there is a limit to how much food can be gathered and processed. This means that dividing up energy use in the most effective way is very important to the ongoing survival of any species.

The brains of our early human ancestors grew to be much larger than that of any other creature in their environment. It enabled the development of sophisticated social structures with language and culture, increased precision in body movements, the use of tools, rational thoughts and so much more. This made them far more effective and adaptable and enabled an enormous leap in fitness for their environment.

The down side of this amazing development was a massive increase in the amount of energy needed to fuel the brain, which uses a large proportion of our overall daily energy requirements. Therefore, anything that would enable the brain to use less energy, but still remain just as effective, would confer a competitive advantage.

Pattern Making

In order to decrease the amount of energy consumed, rather than take in all the sensory data that we perceive through our senses, it is far more efficient for us to select the pieces of data that are more critical rather than that which is less critical. By focusing on the more important sensory data it also speeds up the data processing time, which makes it possible for us to respond to our world in real time.

Our brain selects what it sees as the most critical pieces of information and builds the rest of our experience around what it has selected. It looks for patterns because they make the world more predictable. Patterns allow us to quickly make sense of the data we perceive and make useful predictions of what the future is likely to be like. Once we understand the basic unit of the pattern, we know what the rest will be like, so we only need information about the basic unit of the pattern and how it repeats. Perceiving patterns means we use far less brain energy. That is why we humans are so linked into patterns. Dance and music, art, are full of patterns because our brain naturally seeks them out and feels more secure when there are familiar patterns.

What we experience then is a combination of the sensory data that has been selected as important and what the brain has added to fill in the gaps. The information for the "filling in" comes from assumptions based on our past experience. We assume that the present and future will operate according to the same patterns we have experienced in the past.

It is through recognising patterns that we make meaning and meaning gives a sense of coherence. We are thus meaning making machines, forever seeking to understand our world by find meaning and pattern.

This is a very efficient way for the brain to work, but it does allow errors to occur. Firstly, the brain may fail to select the best information either by ignoring critical data or selecting unimportant data. Secondly, it may misread the patterns from that data by missing important patterns or seeing patterns that are not really there.

When we look at the stars of the night sky, we see a myriad of stars seemingly randomly placed in the firmament and yet within them we see patterns as constellations. The ancient Greeks connected the dots in a meaningful way and found hunters, scorpions, serpents, dragons, dogs and much more. That was not the only way we could have made patterns from the stars. The Hindu, Mayans, Chinese and many others looked at the same stars, but saw different patterns. In the same way, different people experience the same event, but formulate different meanings. No particular pattern is right or wrong, but some may be more effective at enabling the person to interact with their world.

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We must take these patterns we perceive and form them together into a whole, consistent map that we can then use to navigate our way through our world. Our early lizard ancestors needed to form a coherent mental map of the physical world they lived in that they could use as a reference point to make sense of the world they lived in and respond to it effectively. Since survival was crucial, the map needed to be linked to what increases the likelihood of survival and what decreased the likelihood of survival. Light was generally safer than dark, and moving up to higher ground was more often safer than being caught in a hollow. Smooth and level was safer than rough and sloped.

Some time later, we evolved cognitive skills. This required a coherent cognitive map of the conceptual space just as a cognitive map of the physical space had previously been necessary. Rather than "reinvent the wheel" it was easier to reuse the structure of the physical map for our conceptual map. Instead of a landscape of valleys and mountains, rivers and rocks, a landscape of ideas and concepts emerged. The connections to safety were retained and formed the framework for linking concepts. Light is seen as good and darkness is seen as bad. Up is seen as better than down, so we tend to see progress as moving up and being on a mountaintop as being a success (although we talk of depth of knowledge too). Ideas are seen to be close to each other if they are similar or distant if they are more different. If events proceed well they are seen as calm and smooth; if not they are rough and turbulent.

If an ancient creature had to strike with a forelimb, it would be quicker to have one limb predominating, so time is not lost working out which limb to strike with. Either left or right would have been equally effective. For whatever reason, the right hand side came to predominate. Right has come to be seen as better than left, (Right is adroit and dexterous, and left is gauche and sinister in the French and Latin).

Had our environment been physically different, then our whole conceptual vocabulary and the way we see the world could have been quite different. Our mental processing is as much an evolved process as the evolution of our hands and feet.

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Shared Patterns

When an event happens our cognitive map helps us make sense of that event and contextualise what has happened. In order for us to be able to communicate with others, we need to all see the world in a sufficiently similar way. That can only happen if we develop shared understandings of how to interpret the world we live in. That is, our cognitive maps need to align sufficiently with others in our group for messages to be interpreted. This process was particularly enabled by the development of language. When we speak the same language we can share ideas, information and views. We can co-operate and work together for our mutual benefit so much more effectively.

When our early human ancestors came together, they found they could live together more successfully if they took on special roles designed to enhance their natural abilities. They developed roles such as the chief, the warrior, the wisdom keeper and the nurturer. Each member of the society needed to add those roles to their inner map, so they knew how to fulfil those roles

and how to act when someone else was acting in one of the roles. These shared constellations of mental energy have become known as archetypes. The roles above translate to the archetypes of the king, warrior, magician and lover.

By forming these shared conceptual maps, we made community possible. This greatly enhanced our ability to operate together in our environment effectively, but it also rigidified our perspective on what reality was like, because we excluding many other equally valid interpretations. Other groups form their own shared understandings, which are, of course, different from ours. This has often led to us seeing outsiders as threats.

The brain makes mistakes

When the brain has selected its data and compared it to past patterns it sometimes makes mistakes. This is exploited when we see optical illusions. Our brain jumps to conclusions about what the patterns mean and makes a mistake. When it sees the two sloped lines on the sides of figure 1, it assumes that they represent two parallel lines extending away into the distance. The two other lines are therefore put into a three dimensional context. The top line is seen as more distant and should therefore be longer than the bottom one. In fact they are of equal length, but the brain assumes the top one is longer and changes what we experience. What we experience is what our brain thinks makes sense rather than what is actually there.

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Our brain also distorts reality to increase our ability to function in our environment. If a ball is thrown at you quickly, it moves faster than your brain is capable of processing. It actually takes about a half a second to process all the information. If the ball is at point x and coming at you fast, by the time you have processed that information the ball is at a new position, say x'. We would put our hands out where we think the ball will come, but it would arrive early and somewhere else. This would make catching the ball impossible. So, how are we able to catch a ball? It's simply amazing. We see where the ball is, then make a calculation of where we think the ball will be in a half a second's time after we have processed it's position. We actually "see" the ball where it will be by the time we have processed it, rather than were we initially "saw" it, and we can therefore catch the ball. We do not see the world as it is, but in a way that works for living in the world.

Have you ever noticed that when you hear a monotonous background sound, we eventually come to not notice it. The interesting thing, though, is when the background sound stops, we notice the sound stopping. How do we get to hear the sound stopping, when what we actually hear is the onset of silence? The brain retrieves some of the sound to which we have not been paying attention and replays some of it. The brain then turns it off so we can hear the difference. Again, we experience a practical re-creation, which makes us more adaptable rather than experiencing what is actually there.

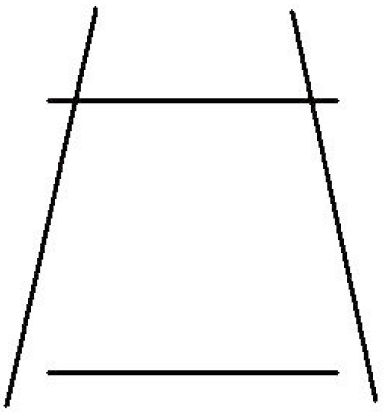

Figure 1

We can only perceive our environment in ways that the apparatus of our body allows. Through evolution we have fine tuned our perception of the particular wave-

lengths of information that give us a competitive advantage. We see light from the range of about 400 – 790 THz and hear sounds in the range of 20 – 20,000Hz. This is only a small part of the range of possible frequencies. Some creatures such as dogs and bees are aware of other frequencies to which we are oblivious. That will mean that their experience of the same world we live in will be quite different from ours. Had our evolutionary history been different, and perhaps only slightly different, our experience of ourselves and the world we live in might have been fundamentally different.

Our experience of time is something else we take for granted. If it is 5pm, then if we wait a while, it will be 6pm. But, if you stop to think of it, you may be able to describe what happens as time passes, but can you even define what it is? We all know "time flies when you're having fun" and it drags when we are bored. So, we experience time differently from how the clock ticks. Again it is our mind that gives us the experience of time that we have.

Our experience as a representation

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We think we perceive the world as it is, but what we perceive can only ever be a representation of what might be "out there". In the case of sight, light waves come from an object that reaches our eye. The eye registers the pattern of light and generates a corresponding electrical impulse, which is sent to the back of the brain. There the impulses are interpreted and a visual image is created that we experience. It is rather like looking into the viewing screen of a video recorder. An event happens out in the world and light comes into the camera lens. Sensors then interpret the light and generate electrical impulses that are analyse and combined to form a smaller image that is visible. The image created is only an image or a representation of what it videos and similarly what we experience can only be a representation of what is out in the world.

The representation must be coherent, so if there is a movement in the outside world, it must be represented in a logical way in the representation. All relevant aspects of the outside world must be mapped through to the representation. Our brain thus creates a three dimensional image of the outside world, accurately mapping the sights, sounds, smells, tastes and touch, not to mention an awareness of time passing. Not only does the brain have to form a consistent representation of the world, but it must create one that maps back onto the outside world and makes sense of the interactions between us and our world. When I reach out to an object, the object in the outside world and my representation of it in my experience must overlap. The object must be where my representation places it. As I touch the object, the physical sensations must again match up. We therefore have a complex representation overlaid out onto the world we experience so both line up and our actions make sense.

Not only is the outside world only a representation, but any experience we have of ourselves can also only be a representation. When I look at my hand I am still only looking at a representation of whatever it is that is there. My hand as I experience it is therefore no more real than a tree I see in the far off distance. The feel of the chair I sit in, feelings of hunger, the taste of wine in my mouth and my own heartbeat are all only representations of events outside the brain. Then we must ask where is the mind if even our brain as we know it is only a representation of itself?

How real is there world out there?

Everything we have discussed so far assumes that there is a real world out there which we interpret and translate into useful representations we can use to interact with that world. The standard scientific understanding of our mind is that it is somehow an emergent product of the electrical activity of the brain, which then interacts with a real, material world out there. There is increasing evidence that this may not be so.

Immanuel Kant put forward the idea that mind creates time and space as a way of experiencing consciousness. Consciousness would then be some type of field beyond time and space which rearranges itself in some way so that time and space exist within it. So, rather than a creating a representation of a real world, everything is a representation. Our brain thus becomes a vehicle through which consciousness allows us to experience past and future, individuality and connectedness. Mind then not only creates representations of an external world, it creates what we suppose to be reality. If our mind is clever enough to create all these exquisite representations of an external reality, is it so unbelievable that it might also create the supposed external reality. Actually, our mind already does it when we dream.

The science of quantum mechanics is offering us some interesting ideas that may help support Immanuel Kant's ideas. Quantum mechanics explores the world at a scale smaller than the atom. It was found that at that the world is very different from the one with which we are familiar. Time can go backwards, particles can exist in two places at once, and particles separated by millions of kilometres can instantaneously communicate. The presence of an observer changes what happens. We are now finding that quantum effects are observable at the scale of our everyday world.

Ervin Laszlo writes of the quantum vacuum, which is a quantum field that has been shown to extend through all time and space. We are always "swimming" in the field that is all around us and all through us. Everything that exists in time and space emerges from the vacuum and will later return to it. Laszlo further proposes that the quantum vacuum is itself conscious and that underlying consciousness of the quantum vacuum has driven evolution to the point that we have a brain capable of experiencing consciousness. Since consciousness is the underlying fabric of the universe, life and consciousness are inevitable.

Stuart Hameroff working with Roger Penrose has come up with an interesting theory. At the quantum level, we cease to find particles made of matter. They become waves and/or particles all at the same time. Instead we must describe what we find in terms of probabilities of existing in a particular region of space. These probabilities may be superimposed on top of one another. They remain this way in a sort of limbo state until there is a collapse of the wave function. It is only when the wave form has collapsed that the particle takes on a distinct form. This usually happens when an external observer views the system.

This is similar to what we find at the human scale. If I am contemplating a holiday to say Auckland, Sydney or Brisbane (I live in New Zealand) until I have made a decision each of the possibilities stand as possible outcomes. I will weigh up the pros and cons of each and make a decision. Once I have decided to go to say, Brisbane, the other two drop away as possibilities and I am left with one outcome.

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Hameroff theorises that the wave function does in fact collapse at the quantum level, but takes millions of years. At the human scale it takes millionths of a second, so we see everything as solid matter. Interestingly, he says very small organelles within our cells called "microtubules" take about 125 milliseconds for the wave form to collapse. That is the time it takes to generate a thought, so he says thinking is a quantum effect we experience at our human scale. Thoughts therefore appear to come out of nowhere because they only come into being when a wave form collapses. All of these ideas would suggest that instead of being separate beings in an external world, maybe we are fundamentally connected to those about us and the external world. Maybe we are all co-creating ourselves as we go.

Spiral Dynamics talks of the bio-psycho-social (spiritual)apparatus of a human being interacting with the life conditions in the environment. From this dynamic mix emerges a worldview to give understanding, meaning and a means of responding effectively to the life conditions. It recognises the dynamic interactions involved in being human.

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Humberto Maturana and Francesco Varela formulated the concept of autopoiesis that also reflects the dynamic interplay within complex adaptive systems. An autopoietic system is a network which continuously regenerates itself through a flow of ongoing processes. For example, a human being continuously regenerates itself through a flow of food and drink. The system is structurally coupled with its environment from which it gains all the resources it needs to survive. We change the environment, it changes us, it changes our mind, and our mind changes us and so on.

Donella Meadows uses the metaphor of dancers. Both dancers are acutely aware of the movements of the other and dynamically react. Neither knows exactly what will happen next and yet they both have some control over what will happen. The dance emerges from the way they work in together.

Taking our place of dignity

If we pull all these ideas together we can form an alternative view of reality from that presented to us by traditional Christianity. We no longer need to see ourselves as separate from each other or the world we live in. Instead of an external God creating the universe as a one time event far in the past and man as a later addition, maybe we are all a part of one dynamic co-creation. God loses his traditional anthropomorphic form and moves from outside creation to becoming an integral part of it. Creation becomes an ongoing, evolving process. Human beings become an integral part of nature and of God. The outside world then may not be a pre-given reality, but something that we form and co-create as we evolve. We then have the dignity and purpose of being an integral part of nature and as active participants in the ongoing co-creation of the universe.

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